UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE		
Case No.	Date Filed	
10-RC-213684	1-26-2018	

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) American Municipal Power 1297 Smithland Dam Rd. Smithland, KY 42081 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Ronald Woodward 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 1-270-928-3020 1-614-403-8147 rwoodward@amppartners.org 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Hydroelectric Power Smithland, KY 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: See Attachment 6b. Do a substantial number (30% Excluded: or more) of the employees in the See Attachment unit wish to be represented by the Petitioner? Yes ✓ No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 1/17/18 and Employer declined recognition on or about (Date) (If no reply received, so state). No Reply 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address None N/A 8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address N/A N/A N/A 8g. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? NONE (Name of labor organization) N/A has picketed the Employer since (Month, Day, Year) N/A 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a, Name 10b. Address 10c. Tel. No. 10d. Cell No. N/A N/A 10e. Fax No. 10f. E-Mail Address N/A 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to Mail Mixed Manual/Mail 11a. Election Type: ✓ Manual any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): Employee Break Room located at 1297 Smithland Dam Rd. Smithland, KY 42081 6:30am To 7:30am & 6:30pm To 7:30pm 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Brotherhood of Electrical Workers AFL-CIO IBEW Local Union No. 816 4515 Clarks River Road Paducah, Ky 42003 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Electrical Workers 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g, E-Mail Address 1-270-898-2456 270-519-3161 1-270-898-2694 jevans@ibewlocal816.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Chad Donathan 13b. Address (street and number, city, state, and ZIP code) 235 Juniper Ct. Mt. Sterling, Ky 40353 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 1-859-404-8905 chad_donathan@ibew.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Chad Donathan Lead Organizer

will ful false Statements on this petition can be punished by fine and imprisonment (u.s. code, title 18, Section 1001)

PRIVACY ACT STATEMENT

Attachment:

5b Unit Involved

Included – All full-time and regular part-time employees of the Employer preforming work at its facility located at 1297 Smithland Dam Rd. Smithland, KY 42081.

Excluded - Office Clerical employees, Professional employees, Guards and Supervisors as defined in the Act, and all other employees.

FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RCPETITION

DO NOT WRITE IN THIS SPACE		
Case No	Date Filed	
10-RC-213762	1-29-2018	

		St. 4566				11.0	 	
INSTRUCTIONS: Unless e-Filed u	ising the	e Agency's webs	ite, <u>ww</u>	<u>w.nirb.gov,</u> submit a	n origi	nal of this	Petition to a	n NLRB office in the Region
in which the employer concerned	is local	led. The petition	must l	be accompanied by I	both a	showing	or interest (i	tition: (2) Statement of
certificate of service showing serv	vice on	the employer ar	nd all c	ther parties named	ın tne	peuuon oi	r. (1 <i>) the pe</i>	he chowing of interest
Position form (Form NLRB-505);	and (3)	Description of R	eprese	entation Case Proced	aures	(FOITH INLI	KD 4012). I	ne snowing of meres.
should only be filed with the NLRE	and st	nould <u>not</u> be serv	ea on	the employer or any	outer	Darry.	he connectable	nd for nurnoses of collective
PURPOSE OF THIS PETITIONRC-CER bargaining by Petitioner and Petitioner desire National Labor Relations Board proceed un.	se in he co	utified as representative	e of the c to Sectio	mployees, The Petitioner a on 9 of the National Labor Re	alieges t elations /	hat the follow Act,	ing circumstan	ces exist and requests that the
2a. Name of Employer	p. v	, , , , , , , , , , , , , , , , , , , ,	2b. Ad	dress(es) of Establishment(:	s) involv	ed (street and	number, city, s	tate, zip code)
CONSOLIDATED NUCLEAR		RITY	30	1 BEAR CREEK R			E, TN 3783	31
3a. Employer Representative - Name an	id Title	NIC MANACED		3b. Address (If same as 3		te same)		
CHAD MEE, SR. LABOR RE	3d. Cell	No WANAGEN		3e, Fax No.	, v L j _	668 SH	3d. E-Mail Ad	dress
865-574-3554	July Gui		- 1	865-576-9444			CHAD.N	MEE@CNS.DOE.GOV
4a. Type of Establishment (Factory, mine, w	holesaler	etc.) 4b. Princip	oal produ	uct or service			5a. City a	and State where unit is located:
NATIONAL SECURITY MANUF.	ACTU	RING WEA	PONS	COMPONENTS			OAI	KRIDGE, TN
5b. Description of Unit Involved		-	5 - 1711.	(4) (4) (4)	60		7/2	8a. No. of Employees in Unit:
naturals.				ZO MOLUBE OUAL	T)/ F	NUVCIOAL	TECTIMO	17
ALL FULL AND REGULAR PART -	- TIME	HOURLY EMPLO	YEES	TO INCLUDE QUALI	111-1	HISICAL	IESTING	6b. Do a substantial number (30%
TECHNICIANS.								or more) of the employees in the unit wish to be represented by the
Excluded:								Petitioner? Yes V No
OFFICE CLERICAL EMPLOYEES, PRO	FESSIO	NAL EMPLOYEES,	MANA	GERIAL EMPLOYEES, G	SUARD	S, AND SUF	PERVISORS,	
AS DEFINED IN THE ACT.					14/5		- 23 - 42 	The same of the sa
7a. Request for recognition	as Barga	ining Representative	was ma	de on <u>Petition will serve</u>	as requ	est for reco	gnition and En	player declined recognition on or
about(date) 7b. Petitioner is currently re	(if no rep	ly received, so state)	esentativ	e and desires certification	under 1	he Act.		7.72 XXII 1995 1
8a, Name of Recognized or Certified Bargaining	Agent (If	none, so state).	oc nan-	8b. Address				
ATOMIC TRADES AND LAB	OR CC	UNCIL, AFL-C	Ю	P.O. BOX	K 406	B, OAK R	IDGE, TN	
8c, Tel. No.	8d. Cell	No.		8e. Fax No. 865-574-0482	8f, E-Mail Address MICHAEL.THOMPSON@CNS.DOE.GO			
865-241-3200 865-250-8691								
INTERNATIONAL ASSOCIATION OF MACHINISTS AND		81. Expiration Date of Current or Most Recent Contract, if any (Month, Day. Year) JUNE 22, 2020		y (Month, Day. Year)				
AEROSPACE WORKERS, AT E-00								
Is there now a strike or picketing at the E (Name of labor organization)	, ha	s picketed the Employer	r since (M	onth, Day, Year)				
10. Organizations or individuals other than known to have a representative interest in an	Petitioner ny employ	and those named in rees in the unit descri	items 8 : bed in ite	and 9, which have claimed em 5b above. (If none, so sta	te) N	IONE	esentatives and	4
10a. Name		10b. Address			10c. Tel. No. N/A			10d. Cell No. N/A
N/A		N/A			10e, Fax No.			10f. E-Mail Address
			761			N/A Election Ty	(00)	N/A
 Election Details: If the NLRB conducts an early such election. 	lection in	352		ori with respect to		✓ Manual	Mail	Mixed Manual/Mail
11b. Election Date(s);		11c, Election Time	(s):			11d. Election Location(s): TRAINING ROOM		
02/21/2018		4:00	PM - 1	6:00 PM			7/25	
12 a, Full Name of Petitioner (including local nam IAMAVV, AFL-CIO			200		690	E. LAMAR	et and number, BLVD., SU	city, state, and ZiP code) TE 580, ARLINGTON, TX 76011
12c. Full name of national or international la INTERNATIONAL ASSOCIA	bor organ	ization of which Petit OF MACHINIS	ioner is a TS AN	an affiliate or constituent (if D AEROSPACE W	f none, s ORK	so state) ERS, AFL	-CIO	70,000
12d, Tel, No. 817-505-0100	12e, Ce					12g. E-Mail	Address	
13. Representative of the Petitioner who will acce	pt service	of all papers for purpose	es of the r	epresentation proceeding.				
13a, Name and Title				13b. Address (street and numb				
JAMES R. LITTLE – GRAND LODGE SPECIAL REPRESENTATIVE 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011								
13c, Tel. No. 13d, Cell No. 13e, Fax No. 13d, E-Mail Address			Address					
817-505-0100	682-4	01-7835		817-459-0107			JLIII <u>L</u>	E@IAMAW.ORG
I declare that I have read the above Petition and	that the st	atements are true to the	best of n	ny knowledge and belief.	-			<u> </u>
Name (Print) Sign	na rore	P 11 -)	Title				DATE
JAMES R. LITTLE	fem.	K X	-	GRAND LOI	DGE I	REPRES	ENTATIVE	1/29/2018
WILLFUL FALSE STATE	MENTS	ON THIS PETITION (CAN BE	PUNISHED BY FINE AND	IMPRIS	ONMENT (U.	.S. CODE, TITI	E 18, SECTION 1001)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE			
Case No. 10-RC-215399	Date Filed 2/23/18		

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Daimler Trucks North America LLC 1800 North Main Street, Mount Holly, NC 28120 3a. Employer Representative - Name and Title Address (If same as 2b = state same) Lynn Thayer, Manager Labor Relations Same as 2b 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 704-822-7067 704-360-7691 lynn.thayer@daimler.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Truck assembly Trucks Mount Holly, NC 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: See attachment 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit wish to be represented by the See attachment Petitioner? Yes ✓ No Request for recognition as Bargaining Representa ive was made on (Date) and Employer declined recogni ion on or about Check One: 2/19/18 (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address None 8c Tel No 8d Cell No 8e. Fax No. 8f F-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: Manual Mixed Manual/Mail Mail any such election. 11b Flection Date(s): 11c. Election Time(s): 11d. Election Location(s): Training Room, 1800 North Main St., Mount Holly, NC 28120 March 15 2018 1:30pm - 2:30pm 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) United Auto Workers Local 5285 113 East Charlotte St., Mount Holly, NC 28120 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Automobile, Aerospace & Agricultural Implement Workers of America, International Union 12d. Tel No. 12f. Fax No. 12e Cell No. 12g. E-Mail Address 704-822-0839 704-941-4590 704-827-7191 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title James D. Fagan, Jr. 13b. Address (street and number, city, state, and ZIP code) Stanford Fagan LLC, 2540 Lakewood Ave SW, Atlanta, GA 30315 13d. Cell No. 13c. Tel No 13e. Fax No. 13f F-Mail Address 404-897-1000 fagan@sfglawyers.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date James D. Fagan, Jr. /s James. D. Fagan Jr. Attomey February 23, 2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

ATTACHMENT

The Petitioner presently represents employees of Daimler Trucks North America LLC at its Mount Holly, North Carolina facility in the following unit:

Production and Maintenance employees at the Truck Manufacturing Plant and PDI Center located at Mt. Holly, North Carolina, as defined by the National Labor Relations Board, Case No. II-RC-5666 in the Certification of Representative, but excluding all other employees such as but not limited to Supervisors, Professional Employees, Guards, Office Employees, employees whose duties are of a confidential nature, and any excluded employee as defined in the Labor Management Relations Acts of 1947, as amended.

This petition seeks a self-determination election for the presently unrepresented full time and regular part time information technology technicians employed by the Employer at its Mount Holly, North Carolina facility, to be included in the bargaining unit already represented by the Petitioner at the Mt. Holly, North Carolina facility.

UGSOA

FORM NLR8-502 (RC) (4-15)

Mike LeBlanc

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE			
Case No. 10-RC-216319	Date Filed 03/12/2018		

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner dealres to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Walden 801 Broadway Nashville, 701 Broadway Nashville, 110 Ninth Avenue South Nashville 3a. Employer Representative - Name and Title 3b. Address (if same as 2b - state same) Dick Wong 100 East Tenth Street Chattanooga TN 37402 3c. Tel. No. 3d, Cell No. 3e. Fax No, 3f. E-Mall Address 423-702-8200 404-304-3006 423-702-8204 dick.wong@waldensecurity.com 4a. Type of Establishment (Factory, mlne, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Federal Court House SECURITY Nashville TN 8b. Description of Unit Involved ба. No. of Employees in Unit; Included: all fulltime and part time armed and unarmed security officers employed by the employer 26 6b. Do a substantial number (30% Excluded: or more) of the employees in the clerical, managerial, salaried, and supervisory personel as defined by the act unit wish to be represented by the Petitioner? Yes ✓ No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) NA and Employer declined recognition on or about (Date) (If no reply received, so state). NA Petitioner is currently recognized as Bargaining Representative and desires certification under the Act, 8a. Name of Recognized or Certified Bargaining Agent (if none, so state). 8b. Address na na 8c. Tel No. 8d Cell No. Se. Fax No 8f, E-Mail Address ńα na пя 8g. Affiliation, if any 8h. Date of Recognition or Certification 8i, Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) na NA 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA if so, approximately how many employees are participating? NA (Name of labor organization) NA , has picketed the Employer since (Month, Day, Year) NA 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a, Name 10b. Address 10c, Tel, No. 10d. Cell No. NΑ NΑ 10e. Fax No. 10f. E-Mail Address NA MΔ 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Efection Type; Manual ✓ Maii Mixed Manual/Matt any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): first available NΑ NΑ 12a. Full Name of Petitioner (including local name and number) 12b, Address (street and number, city, state, and ZIP code) United Government Security Officers of America and its Local 176 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Government Security Officers of America International Union 12d, Tel No. 12e, Cell No. 12f. Fax No. 12g. E-Mail Address 617-620-7225 617-620-7225 NA Mlebianc@ugsoa.com 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Mike LeBland DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2679 Cranberry Highway East Wareham, MA, 02538 13c. Tel No. 13d. Cell No. 13e, Fax No. 13f. E-Mail Address 617-620-7225 617-620-7225 774-678-4658 Mleblanc@ugsoa.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print)

PRIVACY ACT STATEMENT Solicitation of the Information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 of seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

DHS Vice President UGSOA International Union

Name (Print)

Lance Heasley

Signature

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE IN THIS SPACE			
Case No.	10-RC-217195	Date Filed 03/26/2018	

Date

03/26/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2a. Name of Employer Consolidated Nuclear Security, LLC 301 Bear Creek Rd, Oak Ridge, TN 37831-8220 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) SAME AS ABOVE Chad Mee, Sr. Labor Relations Manager 3e. Fax No. 3f. E-Mail Address (865)574-3554 (865)576-9444 chad.mee@cns.doe.gov 5a. City and State where unit is located: 4b. Principal product or service 4a. Type of Establishment (Factory, mine, wholesaler, etc.) Oak Ridge, TN National Security Manufacturing Plant Weapons Components 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: See Attachment A 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit wish to be represented by the Petitioner? Yes V No 7a. Request for recognition as Bargaining Representative was made on (Date) 3/26/2018 and Employer declined recognition on or about Check One: No Reply __(Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). Atomic Trades and Labor Council, AFL-CIO 8b. Address PO Box 4068, Oak Ridge, TN 37831-4068 8f. E-Mail Address Se Fax No. 8c. Tel No. 8d Cell No. (865)574-0482 michael.thompson@cns.doe.gov (865)241-3200 (865)250-8691 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent 8g. Affiliation, if any Contract, if any (Month, Day, Year) 09/25/1946 See Attachment A 06/22/2020 , has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10c Tel No 10d. Cell No. 10b. Address 10a. Name 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type:
Manual Mail Mixed Manual/Mail any such election. 11d. Election Location(s): 11c. Election Time(s): 11b. Election Date(s): New Hope Center located at 301 Bear Creek Rd, Oak Ridge, TN 37831-8220 April 9, 2018 15:00-18:30 12b. Address (street and number, city, state, and ZIP code) 12a. Full Name of Petitioner (including local name and number) PO Box 4068, Oak Ridge, TN 37831-4068 Atomic Trades and Labor Council, AFL-CIO 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12g. E-Mail Address 12e. Cell No. 12f Fax No 12d Tel No. (202)394-4561 lheasley@icwuc.org (330)926-0816 (330)926-1444 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Lance Heasley, ICWUC/UFCW Organizer See Attachment A 13c. Tel No. 13d, Cell No. 13e, Fax No. 13f. E-Mail Address SAME AS ABOVE SAME AS ABOVE SAME AS ABOVE SAME AS ABOVE I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

ICWUC/UFCW Organizer

PRIVACY ACT STATEMENT

Attachment A

5b. Description of Unit Involved

Included: The petitioner presently represents all hourly paid production, maintenance, and service employees at the Y-12 Site, Oak Ridge TN., including Radiological Control Technicians, X-Ray Technicians, equipment dispatchers and receiving and shipping clerks. This petition seeks a self-determination election for the presently unrepresented all full-time and regular part-time Industrial Hygiene Technicians.

Excluded: All other employees, including assay analysts, junior assay analysts, development technicians, glassblowers, laboratory analysts, junior laboratory analysts, property inventory clerks, assistant steam plant engineers, office clerical employees, environmental technology technical specialist, professional employees, guards, and supervisory employees as defined in the act.

8g. Affiliation, if any

Local 252C of the International Chemical Workers Union Council of the United Food & Commercial Workers Union, AFL-CIO, CLC

13b. Address (street and number, city, state, and ZIP code)

PO Box 4154, Oak Ridge, TN 37831-4154

Additional Service to: 1655 West Market Street, 6th Floor, Akron, OH 44313

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE			
Case No.	10-RC-217404	Date Filed March 29, 2018	

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 10 Peachtree Place NE GA Atlanta 30309-A lanta Gas Light 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 10 Peachtree Place NE GA Atlanta 30309-Bryan Batson 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address bbatson@southernco.com (404) 584-4000 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Provide Gas Atlanta, GA 5b. Description of Unit Involved 6a. No. of Employees in Unit: 650 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. F-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to Mail Mixed Manual/Mail 11a. Election Type: Manual any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): April 23, 2018 7 AM - 9 AM Atlanta 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) James W Flynn International Brotherhod of Electrical Workers 502 Taylor Trl MS Waveland 39576-3859 12c. Full name of national or international labor organization of which Petitioner is an affiliate or cons ituent (if none, so state) International Brotherhood of Electrical Workers 12g. E-Mail Address james flynn@ibew.org 12d Tel No 12e. Cell No. 12f. Fax No. (601) 590-0698 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) 13c Tel No. 13d Cell No. 13e Fax No. 13f F-Mail Address I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date International Lead Organizer 03/29/2018 09:34:22 James W Flynn

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Attachment

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	

Employees Included

AG General Tech, AMR Tech, AU Tech, General MR Tech, General Tech, Crew Lead, Field Specialist (A, B, C & LM), Field Specialist/Corrosion, Spec Ass. Protection, Spec. Lead Mechanical, Spec. Mechanical, Spec. Pressure Control, Field Tech (AG/BG, General, B & C), Corrosion Tech (I, II & III), Pressure Control Tech (I, II & III), General Tech MR and Utility Tech

Employees Excluded

All Clerical, office employees, security guards, janitoria, grounds keeping and supervisory personnel as defined by the NLRA.

Joshua Brewer

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE		
Case No. 10-RC-217463	Date Filed March 30, 2018	

12g. E-Mail Address

3/28/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 650 S. Poplar St. Florence, AL 35630 Gemstone 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) John Starkey, Plant Manager SAME 3f. E-Mail Address 3d. Cell No. 3e. Fax No. 5a. City and State where unit is located: 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service Florence, AL Poultry Debone Plant Poultry 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: Production hourly, maintenance, Quality assurance and shipping. 245 6b. Do a substantial number (30% or more) of the employees in the Excluded: Office clerical, management and sanitation unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) 3/28/18 and Employer declined recognition on or about (Date) (If no reply received, so state). Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address 1901 10th Avenue South Birmingham, AL 35205 Retail, Wholesale Department Store Union 8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address 205-322-7462 205-420-9309 205-322-8447 bmurphree@rwdsumidsouth.org 8i. Expiration Date of Current or Most Recent 8g. Affiliation, if any 8h. Date of Recognition or Certification Contract, if any (Month, Day, Year) None 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? , has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10c. Tel. No. 10d. Cell No. 10a Name 10b. Address

10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: Manual Mail Mixed Manual/Mail any such election. 11d. Election Location(s): 11b. Election Date(s): 11c. Election Time(s): 4/16/18 7-9 a.m. & 4-6 p.m. 650 S. Poplar St. Florence, AL 35630 12b. Address (street and number, city, state, and ZIP code) 1901 10th Avenue South Birmingham, AL 35205 12a. Full Name of Petitioner (Including local name and number) Retail, Wholesale Department Store Union 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) Retail, Wholesale Department Store International Union

12d. Tel No. 12e. Cell No. 12f. Fax No. 212-779-2809 212-684-5300

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Joshua Brewer, Rep 1901 10th Avenue South Birmingham, AL 35205

13d. Cell No. 13f. E-Mail Address 13e. Fax No. 13c. Tel No. bmurphree@rwdsumidsouth.org 205-420-9309 205-322-8447 205-322-7462

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Date

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

Business Representative

PRIVACY ACT STATEMENT

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE				
Case No	10-RC-217632	Date Filed	04/02/2018	

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITIONRC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bergaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (street and number, city, state, zlp code) CONSOLIDATED NUCLEAR SECURITY 301 BEAR CREEK RD., OAK RIDGE, TN 37831 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) CHAD MEE, SR. LABOR RELATIONS MANAGER (SAME AS ABOVE) 3c. Tel. No. 3d. Cell No 3e. Fax No. 3d. E-Mail Address 365-574-3554 CHAD.MEE@CNS.DOE.GOV 865-576-9444 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: WEAPONS COMPONENTS NATIONAL SECURITY MANUFACTURING OAK RIDGE, TN 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: ALL FULL AND REGULAR PART TIME HOURLY MATERIAL CONTROLLER TECHNICIANS. 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Excluded: Petitioner? Yes V No OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT. Check One: 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or _(date) (if no reply received, so state) 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state) 8b. Address ATOMIC TRADES AND LABOR COUNCIL, AFL-CIO P.O. BOX 4068, OAK RIDGE, TN 37831 8c. Tel. No. 8d. Cell No. 8f. E-Mail Address 865-241-3200 865-250-8691 865-574-0482 8h. Date of Recognition or Certification MICHAEL.THOMPSON@CNS.DOE.GOV 8g. Affiliation, if any 81. Expiration Date of Current or Most Recent INTERNATIONAL ASSOCIATION OF MACHINISTS AND Contract, if any (Month, Day, Year) SEPTEMBER 25, 1946 JUNE 22, 2020 AEROSPACE WORKERS, AFL-CIO 9. Is there now a strike or picketing at the Employers establishment(s) involved? If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or Individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10b. Address 10c. Tel. No. 10d. Cell No N/A N/A E-Mail Address N/A N/A Fax No. N/A Election Type: N/A 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election ✓ Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s); TRAINING ROOM APRIL 24, 2018 4:00 PM - 6:00 PM 12 a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO 12e. Cell No. 12d, Tel, No. 12g. E-Mail Address 817-505-0100 817-459-0107 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a, Name and Title 13b. Address (street and number, city, state, and ZIP code) JAMES R. LITTLE, GRAND LODGE SPECIAL REPRESENTATIVE 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011 13c. Tel. No 13d, Cell No. 13e Fax No. 13d. E-Mail Address 817-505-0100 682-401-7835 817-459-0107 JLITTLE@IAMAW.ORG I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief, Name (Print) Signatu DATE GRAND LODGE SPECIAL REPRESENTATIVE JAMES R. LITTLE 4/2/2018 WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

FORM NLRB-502 (RC)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT V	VRITE IN THIS SPACE	
Case No	Date Filed	
10 DC 010000	4.0.2010	

10-RC-218038 4-9-2018 INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition: (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITIONRC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Addréss(es) of Establishment(s) involved (street and number, city, state, zip code) **DEPLOYED RESOURCES** BUILDING 18558 FORT STEWART, GA 31304 (SUB-CONTRACTOR TO ALOG CORPORATION)

3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) **KEITH SIKES** 164 MCPIKE ROAD, ROME, NY 13441 3c.Tel. No 3d. Cell No. 3e. Fax No 3d. E-Mail Address' KSIKES@DEPLOYEDRESOURCES.COM 478-841-2105 315-281-0041 4a. Type of Establishment (Factory, mine, wholesaler. etc.) Principal product or service 5a. City and State where unit is located: FIRING RANGE OPERATIONS AND LOGISTICS SUPPORT FORT STEWART, GA **MAINTENANCE** 5b. Description of Unit Involved 6a. No. of Employees In Unit: ncluded: ALL FULL AND REGULAR PART TIME LABORERS WORKING AT THE COMPANY'S FACILITY AT FORT STEWART, GA. 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Excluded: Petitioner? Yes V No OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT. Check One: 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about _____(date) (if no reply received, so state).

7b. Petitloner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state) NONE N/A 8c. Tel. No. 8d. Cell No. 8e. Fax No N/A N/A N/A N/A 8g. Affiliation, if any 8h. Date of Recognition or Certification 81, Expiration Date of Current or Most Recent Contract, if any (Month, Day. Year) N/A N/A 9. Is there now a strike or picketing at the Employers establishment(s) involved? If so, approximately how many employees are participating? _ (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10a. Name 10b Address 10c. Tel. No 10d. Cell No. N/A N/A N/A N/A 10e, Fax No. E-Mail Address N/A 11a. Election Type; N/A 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. ✓ Manual Mail Mixed Manual/Mall 11b. Election Date(s); 11c. Election Time(s): 11d, Election Location(s) BUILDING 18558 - BREAK ROOM 05/01/2018 5:00 AM - 7:00 AM 12 a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011 IAMAW, AFL-CIO 12c. Full name of national or International labor organization of which Petitioner is an affiliate or constituent (if none, so state)
INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO 12e, Cell No. 12d, Tel. No. 817-505-0100 12f. Fax No. 12g. E-Mall Address 817-459-0107 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011 13c, Tel. No 13d, Cell No. 13e. Fax No. 13d. E-Mail Address 817-505-0100 817-459-0107 682-401-7835 JLITTLE@IAMAW.ORG I declare that I have read the above Petition and that the stat ents are true to the best of my knowledge and belief. Name (Print) Signatuça JAMES R. LITTLE GRAND LODGE REPRESENTATIVE 04/06/2018 WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE			
Case No	Date Filed		
10-RC-218096	April 9, 2018		

NOT LT				10	-KC-	210070		April 7, 2010
INSTRUCTIONS: Unless e-Filed u in which the employer concerned	sing the Ager	ncy's website, y	www.nlrb	.gov, submit a	an origin	al of this showing	Petition to a	n NLRB office in the Regionsee 6b below) and a
certificate of service showing serv	is localed. Th	nnlover and a	II other n	arties named	in the i	netition o	f: (1) the pe	tition: (2) Statement of
Position form (Form NLRB-505);	and (3) Descr	iption of Repre	esentation	n Case Proce	dures (Form NL	RB 4812), T	he showing of interest
should only be filed with the NLRE	and should r	ot be served o	on the em	plover or any	other p	arty.		•
PURPOSE OF THIS PETITIONRC-CER bargaining by Petitioner and Petitioner desire	T1FICATION OF	REPRESENTATI	VE - A sub-	stantial number o	of employ alleges th	ees wish to at the follow	o be represente ving circumstan	ed for purposes of collective ces exist and requests that the
National Labor Relations Board proceed und 2a. Name of Employer	ier its proper autn			of Establishment			d number city s	tate, zip code)
ALOG CORPORATION (PRIME		CONTRACTOR OF THE PROPERTY OF	BUILDII	NG 18558 FO	ORT ST	rewar1		
3a. Employer Representative - Name an	d Title	3.0	750 ESCHOOL - 330 - 1935-	lress (If same as			10111	
HEATHER CARANO 3c,Tel. No.	3d. Cell No.		3e. Fa	ACPIKE ROA	AD, RO	ME, NY	13441 3d. E-Mail Ad	dress
256-319-2066			866	6-301-4390			HCARANO	@ALOGCORP.COM
4a, Type of Establishment (Factory, mine, w. LOGISTICS SUPPORT	holesaler, etc.)	4b. Principal pr	RANGE	OPERATION	NS AND)		ind State where unit is located: RT STEWART, GA
5b. Description of Unit Involved	W - 25	1717 (71 4 1 1				24.2		6a, No, of Employees in Unit:
Included: ALL FULL AND REGULAR PART TIME TECHS AND GENERAL MAINTENANCE F Excluded: OFFICE CLERICAL EMPLOYEES, PRO AS DEFINED IN THE ACT.	PERSONNEL W	ORKING AT THE	COMPAN	Y'S FACILITY A	AT FORT	STEWAR	T, GA.	15 6b. Do a substantial number (or more) of the employees in unit wish to be represented by Petitioner? Yes \(\subseteq \) No
Check One:		10 10	0 (2)					v
	as Bargaining Re if no reply receiv		made on <u>Pe</u>	tition will serve	as reque	st for reco	<u>onition</u> and Em	player declined recognition on or
7b. Petitioner is currently re	cognized as Barg	aining Representa	ative and de		under the	e Act.		
8a. Name of Recognized or Certified Bargaining NONE	FX att to	state).	lo é	8b. Address N/A			8f. E-Mall Ad	4.1.1.1
8c. Tel. No. N/A	8d. Cell No. N/A		8e, Fax N/A				N/A	aress
8g. Affillation, if any			8h. Date	of Recognition or	· Certifical	tion		Date of Current or Most Recent
N/A			N/A				N/A	y (Month, Day, Year)
Is there now a strike or picketing at the Er (Name of labor organization)		hment(s) involved d the Employer since			roximately	how many		participating?
Organizations or individuals other than F known to have a representative interest in an	etitioner and thosy y employees in th	se named in items e unit described in	8 and 9, whitem 5b ab	nich have claimed ove. (If none, so sta		on as repre	sentatives and	other organizations and individua
10a. Name	10b, Ad	dress			10c. T	el, No.		10d, Cell No.
N/A	N/	Δ			N/A 10e. Fax No. 101		N/A 10f, E-Mail Address	
DOMESTICS CONTROL CONT	1352	1995	- T- 101		N.	/A		N/A
 Election Details: If the NLRB conducts an eleany such election. 		n n n	sition with re	espect to	~	The state of the s	Mall	Mixed Manual/Mail
11b. Election Date(s):	11c. E	lection Time(s):			10000	ection Loca		
05/01/2018	5:00 /	AM – 7:00 AM (& 1:30 PN	n - 3:30 PM	_		5) d 1082 b	BREAK ROOM
12 a. Full Name of Petitioner (Including local name and number) IAMAW, AFL-CIO					690 E	LAMAR	et and number, BLVD., SUI	city, state, and ZIP code) TE 580, ARLINGTON, TX 7
12c. Full name of national or international lat INTERNATIONAL ASSOCIA	or organization o	f which Petitioner i CHINISTS A	s an affiliate	e or constituent (ii ROSPACE W	f none, so IORKE	state) RS, AFL		45000000000000000000000000000000000000
12d, Tel. No. 12e. Cell No. 817-505-0100			12f. Fax No. 12g. E-Ma 817-459-0107		12g. E-Mail A	ddress		
13. Representative of the Petitioner who will accept	t service of all pape	ers for purposes of th				(a. a. 4.715		
13a, Name and Title	OIAL DEDDEO	-NITATO/-		ress (street and numl				OTON TV 70044
JAMES R. LITTLE - GRAND LODGE SPE 13c, Tel. No.	13d, Cell No.	ENTATIVE	13e. Fa		RLAD'	SUITE	13d, E-Mail A	GTON, TX 76011
817-505-0100	682-401-783	5	81	17-459-0107			4	@IAMAW.ORG
I declare that I have read the above Petition and t	hat the statements	are true to the best o	of my knowle	dge and belief.				1 00000
Name (Print) Sign.	atur	~ 4	t .	Title			T ₁	DATE
JAMES R. LITTLE	C //mm	1 1		GRAND LOI			ENTATIVE	04/09/2018
WILLFUL FALSE STATE	MENTS ON THIS	PETITION CAN B	E PUNISHE					

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE			
Case No.	Date Filed		
10-RC-218122	4/10/18		

RC PETITION

KO 1	LIIION		10 1	C 210122		7/10/10
INSTRUCTIONS: Unless e-Filed						
in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate						
of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form						
	(Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed					
with the NLRB and should not	be served on the	employer or a	ny other party.			
PURPOSE OF THIS PETITION: RC bargaining by Petitioner and Petition requests that the National Labor	ner desires to be certi	fied as representa	tive of the employees. The	Petitioner alleges the	at the followin	g circumstances exist and
2a. Name of Employer	Relations Board pro		Address(es) of Establishmer			
South Carolina Electric and Ga	as		Scana Parkway, Cay		•	
3a. Employer Representative - Name	e and Title		3b. Address (If same a	s 2b – state same)		
Ann Davis - Labor Relations			Same			
3c. Tel. No.	3d. Cell No.		3e. Fax No.	1	3f. E-Mail Add	ress
803-217-9287	N/A		803-933-8551		adavis@sc	ana.com
4a. Type of Establishment (Factory, mi	ne, wholesaler, etc.)		roduct or service			and State where unit is located:
Natural gas service provider		Sale, installation, a	nd maintenance of natural gas and	d natural gas distribution sys	see att	achment "B"
5b. Description of Unit Involved						6a. No. of Employees in Unit:
Included: See attachmen	t "A"					Approximately 100 6b. Do a substantial number (30%
Excluded:						or more) of the employees in the
See attachment	"A"					unit wish to be represented by the Petitioner? Yes ✓ No
Check One: 7a. Request					Employer dec	lined recognition on or about
 			red, so state). No repl			
			Representative and desires	certification under the	Act.	
8a. Name of Recognized or Certified None	Bargaining Agent (i	t none, so state)	. 8b. Address N/A			
8c. Tel No.	8d Cell No.		8e. Fax No.	1	8f. E-Mail Add	ress
N/A	N/A		N/A		V/A	
8g. Affiliation, if any			8h. Date of Recognition o	or Certification		Date of Current or Most Recent y (Month, Day, Year)
N/A			N/A		V/A	y (Wonti, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No						
(Name of labor organization) N/A		, has pi	cketed the Employer since ((Month, Day, Year) <u>N</u>	/A	
 Organizations or individuals other the known to have a representative interest None 					esentatives and	d other organizations and individuals
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.
NI/A	N1//	N		N/A		N/A
N/A	N/A	4		10e. Fax No. N/A		10f. E-Mail Address N/A
 Election Details: If the NLRB cond any such election. 	ducts an election in th	is matter, state yo	our position with respect to	11a. Election Type:	Manual	Mail _ Mixed Manual/Mail
11b. Election Date(s): Tuesday 5/8/2018 - Thursday 5/10/20		lection Time(s): achment "C"		11d. Election Location(s): See attachment "C"		
12a. Full Name of Petitioner (including local name and number) International Brotherhood of Electrical Workers Locals 398 and 772			12b. Address (street and number, city, state, and ZII (LU398)107 O'Bannon Court, Summerville, SC29483 (LU772) 102 Bending C			
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Electrical Workers						
12d. Tel No. (LU398) 843-709-1967 (LU772) 803-608-2	12e. Cell No.	2d Tel No	12f. Fax No. None],	12g. E-Mail Ac	ddress m@aol.com (LU772) fulmer772@aol.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.						
13a. Name and Title David Havnes IBEW Lead Organizer NC/SC 13b. A			13b. Address (street and 125 Lonnie Gentry Road, Ro	d number, city, state, a		
13c. Tel No. 336-592-5961	13d. Cell No. 336-592-5961		13e. Fax No. None		13f. E-Mail Add	
I declare that I have read the above p		statements are t	E 25 (6) (8) (8)		aviu_naynes(@iocw.org
Name (Print)	Sitinature		Title		Date	
David Haynes	(IBEW Lead Organizer N	NC/SC	4/10/2018	

WILLFUL FALSE STATEMENTS ON THE PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

ATTACHMENT "A"

Form NLRB-502 (RC)

Box 5b: Description of Unit Involved

The Petitioner seeks a self-determination election in the voting group of employees listed below. The petitioner presently is seeking to represent approximately 100 employees of the employer The election would determine whether the petitioned for employees desire to be represented by the Petitioner, and thereby to be taken to have indicated their desire to be included in the existing Collective Bargaining Unit of South Carolina Gas and Electric employees currently represented by the International Brotherhood of Electrical Workers, AFL-CIO Local Union 398, pursuant to the Board's decision in Armour & Co., 40 NLRB 1333 (1942) and the Globe Machine & Stamping Co., 3 NLRB 294 (1937).

If a majority of valid ballots are not cast for representation, they will be taken to have indicated the employees' desire to remain unrepresented.

INCLUDED: All gas journeyman and apprentices from the Southern Division, Eastern Division and the Abbeville and Camden Offices of the Central Division

Excluded: All other employees, including office clerical employees, professional employees, janitorial, grounds keeping, guards, and supervisors as defined by the Act.

ATCALIA. GA

ATTACHMENT "B"

Form NLRB-502 (RC)
Box 5a. City and State where unit is located

South Carolina Electric & Gas (SCE&G)

SCE&G Gas Operations

- Abbeville District Office Abbeville, SC 8:00am to 5:00pm
- Beaufort District Office Beaufort, SC 8:00am to 4:30pm
- Bluffton Office Bluffton, SC 8:00am 4:30pm
- Camden District Office Camden, SC 8:00am 4:30pm
- Charleston Gas Operations Charleston, SC 8:00am 4:30pm
- Cheraw District Office Cheraw, SC 8:00am 5:00pm
- Florence District Office Florence, SC 8:00am 5:00pm
- Georgetown District Office Georgetown, SC 8:00am 5:00pm
- Hampton Business Office Hampton, SC 8:00am 4:30pm
- Hartsville Business Office Hartsville, SC 8:00am 5:00pm
- Lake City District Office Lake City, SC 8:00am 5:00pm
- Marion District Office Marion, SC 8:00am 5:00pm
- Myrtle Beach District Office Myrtle Beach, SC 8:00am 5:00pm
- Summerville District Office Summerville, SC 8:00am 4:30pm
- Sumter Business Office Sumter, SC 8:00am 5:00pm

ATTACHMENT "C"

Form NLRB-502 (RC) Box 11c Election Time(s)

SCE&G Gas Operations

- Abbeville District Office Abbeville, SC 8:00am to 5:00pm (Mail ballot)
- Beaufort District Office Beaufort, SC 8:00am to 4:30pm
- Bluffton Office Bluffton, SC 8:00am 4:30pm
- Camden District Office Camden, SC 8:00am 4:30pm
- Charleston Gas Operations Charleston, SC 8:00am 4:30pm
- Cheraw District Office Cheraw, SC 8:00am 5:00pm
- Florence District Office Florence, SC 8:00am 5:00pm
- Georgetown District Office Georgetown, SC 8:00am 5:00pm
- Hampton Business Office Hampton, SC 8:00am 4:30pm
- Hartsville Business Office Hartsville, SC 8:00am 5:00pm
- Lake City District Office Lake City, SC 8:00am 5:00pm
- Marion District Office Marion, SC 8:00am 5:00pm
- Myrtle Beach District Office Myrtle Beach, SC 8:00am 5:00pm
- Summerville District Office Summerville, SC 8:00am 4:30pm
- Sumter Business Office Sumter, SC 8:00am 5:00pm

Form NLRB-502 (RC) Box 11d Election Location(s)

SCE&G Gas Operations

- Abbeville District Office Abbeville, SC Mail ballot
- Beaufort District Office Beaufort, SC 8:00am to 4:30pm
- Bluffton Office Bluffton, SC 8:00am 4:30pm
- Camden District Office Camden, SC 8:00am 4:30pm
- Charleston Gas Operations Charleston, SC 8:00am 4:30pm
- Cheraw District Office Cheraw, SC 8:00am 5:00pm
- Florence District Office Florence, SC 8:00am 5:00pm
- Georgetown District Office Georgetown, SC 8:00am 5:00pm
- Hampton Business Office Hampton, SC 8:00am 4:30pm
- Hartsville Business Office Hartsville, SC 8:00am 5:00pm
- Lake City District Office Lake City, SC 8:00am 5:00pm
- Marion District Office Marion, SC 8:00am 5:00pm
- Myrtle Beach District Office Myrtle Beach, SC 8:00am 5:00pm
- Summerville District Office Summerville, SC 8:00am 4:30pm
- Sumter Business Office Sumter, SC 8:00am 5:00pm

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE		
Case No.	Date Filed	
10-RC-218501	April 16, 2018	

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 3367 Montreal Industrial Way, Tucker, GA 30084 Hormel Foods Corporation 3a. Employer Representative - Name and Title 3b. Address (If same as 2b = state same) Robert Guthrie, Human Resources Manager Same 3c Tel No 3d Cell No. 3e. Fax No. 3f. E-Mail Address 770-908-4030 rlguthrie@Hormel.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Food processing Food products Tucker, GA 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: See attachment 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit wish to be represented by the See attachment Petitioner? Yes ✓ No Request for recognition as Bargaining Representa ive was made on (Date) 4/16/18 and Employer declined recogni ion on or about Check One: No reply (Date) (If no reply received, so state). Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address None 8c Tel No 8d Cell No 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: Manual Mixed Manual/Mail Mail any such election. 11c. Election Time(s): 11d. Election Location(s): 5 AM - 9 AM; 1 PM - 4 PM May 8, 2018 Conference room 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) United Food and Commercial Workers, Local 1996 3302 McGinnis Ferry Rd. Ste 201, Suwanee, GA 30024 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Food and Commercial Workers International Union 12d. Tel No. 12e Cell No 12f. Fax No. 12g. E-Mail Address 678-714-3500 678-714-3501 rporras@ufcw1996.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) ^{13a. Name and Title} Michael B. Schoenfeld, Attorney Stanford Fagan LLC, 2540 Lakewood Ave SW, Atlanta, GA 30315 13c. Tel No 13d Cell No. 13e Fax No. 13f F-Mail Address 404-622-0521, ext. 2244 404-402-1220 michaels@sfglawyers.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date Michael B. Schoenfeld s/ Michael B. Schoenfeld Attomey April 16, 2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

ATTACHMENT

The Petitioner presently represents employees of Hormel Foods Corporation at its Tucker, Georgia facility in the following unit:

All production and maintenance employees, but excluding office and clerical employees, all inside and outside salesmen, and all supervisory employees with the authority to hire, promote, discharge, discipline, or otherwise effect changes in the status of employees or to effectively recommend such actions.

This petition seeks a self-determination election for the presently unrepresented full time and regular part time Quality Control employees employed by Hormel Foods Corporation at its facility located at 3367 Montreal Industrial Way, Tucker, GA 30084, to be included in the bargaining unit already represented by the Petitioner at the Tucker, Georgia facility.

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE			
Case No.	Date Filed		
10-RC-218970	04/24/2018		

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2501 Dodds Ave Durham School Services, Inc. 1 Dodds Ave <u>Chattanooga 37407-1299</u> 3b. Address (If same as 2b – state same) 3a. Employer Representative - Name and Title Greg Johnson 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address gjohnson@durhamschoolservices com (423) 209-5680 (423) 209-5681 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Transportation transport students Chattanooga, TN 5b. Description of Unit Involved 6a. No. of Employees in Unit: 265 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. F-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: <a> Manual <a> Mail <a> Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): May 11, 2018 8am-11:30am, 12:30pm-2pm, 3:30pm-6pm Service Center, Tyner, Hixson (all 3 facilities) 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Joe Bennett Teamsters Local 327 1178 Antioch Pike 12c. Full name of national or international labor organization of which Petitioner is an affiliate or consituent (if none, so state) International Brotherhood of Teamsters 12g. E-Mail Address jbennett327@comcast.com 12d. Tel No. 12e. Cell No. 12f. Fax No. (615) 573-0782 (615) 781-1658 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) Samuel Morris Attorney Teamsters Local 327 50 N Front St Ste 800 TN Memphis 38103-2181 13c. Tel No. 13d Cell No. 13e. Fax No. 13f. E-Mail Address smorris@gmlblaw.com (901) 528-1702 (901) 483-0838 (901) 528-0246 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date Samuel Morris Attorney 04/24/2018 11:03:45 Samuel Morris

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

 DO NOT WRITE IN THIS SPACE

 Case
 Case
 Date Filed
 04/24/2018

Employees Included

All regular full time and regular part time drivers and aides/monitors

Employees Excluded

All supervisors, managers, dispatchers, clerical, mechanics, lot techs and casuals

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

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RC	P	ET	IT	0	N

DO NOT WRITE IN THIS SPACE			
Case No.	10-RC-219365	Date Filed May 1, 2018	

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 610 8th Street South Birmingham 35233-3b. Address (If same as 2b – state same) 3a. Employer Representative - Name and Title 610 8th Street South AL Birmingham 35233 Vera Matthews 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (205) 934-3514 Vera.Matthews@firstgroup.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Transportation Transit Service Birmingham, AL 5b. Description of Unit Involved 6a. No. of Employees in Unit: 35 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. F-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type:

Manual Mail Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): June 1, 2018 5:00 AM to 7:00 AM, 11:30 AM to 2:30 PM, 5:00 PM Drivers' Break Room 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 2112 12th Ave N Al Birmingham 35234-2720 Gregory Roddy Amaigamated Transit Union Local 725 12c. Full name of national or international labor organization of which Petitioner is an affiliate or consituent (if none, so state)
Amalgamated Transit Union 12g. E-Mail Address groddi@brighthouse.com 12d. Tel No. 12e. Cell No. 12f. Fax No. (407) 625-3242 (205) 591-4633 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) Daniel B. Smith Assistant General Counsel AMALGAMATED TRANSIT UNION 10000 New Hampshire Ave MD Silver Spring 20903-1790 13c. Tel No. 13d Cell No. 13e. Fax No. 13f. E-Mail Address dsmith@atu.org (301) 431-7100 (202) 714-4219 (301) 431-7116 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Date Assistant General Counsel Daniel B. Smith 05/1/2018 11:50:18 Daniel B. Smith

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Attachment

DO NOT WRITE IN THIS SPACE			
Case	Date Filed		

Employees Included

All full-time and regular part-time operators, dispatchers, road supervisors, mechanics, fuelers, and lot coordinators/attendants employed by the Employer at and out of its Birmingham facility.

Employees Excluded

All other employees, office clerical employees, and guards, professional employees and supervisors as defined in the Act.

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE				
Case No.	Date Filed			
10-RC-219864	5/8/18			

RC PE	TITION	10-	-RC-219864	1	5/8/18
INSTRUCTIONS: Unless e-Filed	using the Agency's website, w	www.nirb.gov, submit a	an original of thi	s Petition to	n NLRB office in the Region
in which the employer concerned					
of service showing service on th					
(Form NLRB-505); and (3) Descri			RB 4812). The s	howing of in	terest should only be filed
with the NLRB and should not be	s served on the employer or a	ny other party.			
 PURPOSE OF THIS PETITION: RC- bargaining by Petitioner and Petitioner 	desires to be certified as represente	TIVE - A substantial number	of employees wish	to be represente	d for purposes of collective
requests that the National Labor Re	lations Board proceed under its pe	roper authority pursuant to	Section 9 of the N	lational Labor F	lelations Act.
Za Name of Employer	110	Address(es) of Establishmen	1 0	and number, cit	441
3a. Employer Representative - Name of		3b. Address (H same	ton Hu	13 hearle	111 28801
((11	1100	Same	s 20 - state same)		
30. Jel No. 2	3d. Cell No.	3e. Fax No.		3f. E-Mail Add	iress
(386)847-9478	(386) 847-947	18		Crows	dail@gmail.com
4a Type of Establishment (Factory, mine		roduct or service		5a City	and State where unit is located:
Bar	Cocktail	Sentce		Ash	ville ne
5b. Description of Unit Involved	NAAN				6a. No. of Employees in Unit:
Included: Ill non-mana	former staff				6b. Do a substantial number (30%
Excluded:	o - 70558				or more) of the employees in the
					unit wish to be represented by the
Check One: 7a. Request to	recognition as Bargaining Represen	Pating was made on (Deta)		nd Employee de	Petitioner? Yes No.
78. Request to	(Date) (If no raply receiv			na Employer de	carried recognition on or about
7b. Petitioner is	currently recognized as Bargaining		certification under th	ne Act.	
Se, Name of Recognized or Certified E			10-20-		
Sc. Tel No.	I 84 C-4 No	Las for No.		Trace as and	
8C. 181.NO.	Bd Cell No.	Se. Fax No.		8. E-Mail Ad	dress ,
8g. Affiliation, if any		8h. Date of Recognition o	r Certification.	8i. Expiration	Date of Current or Most Recent
Nom				Contract, If a	ry (Month, Day, Year)
9: is there now a strike or picketing at the	Employer's agrablishment(s) bushus	42 80 Hen soom	dinately how many d	l ministrania ann in	articionathias.
(Name of labor organization)		cketed the Employer since (angeogene mo p	ar or present g
10. Organizations or individuals other the					
known to have a representative interest if	n any amployees in the unit describe	d in item 5b above. (If none	, so state)	bueseurannes en	o curer organizations and monyiptials
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10a: Name	10b. Address		10c. Tel. No.		10d. Cell No.
			10e. Fax No.		10f: E-Meil Address
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11. Election Details: If the NLRB condu	cts an election in this matter, state ye	our position with respect to	11a, Election Typ	e: Menual	Mail Mixed Manual/Mall
any such election. 13b: Election Date(s): TOD	11c. Election Time(s):		11d. Election Loc	ation(s):	No. 12
TOD		TBD		T131	9
12a. Eult Mame of Petitioner discluding	local name and number)		12b Address (str	net and number	city, state, and ZIP code)
Service Workers In Solidar 12c, Full name of national or international	Labor organization of which Patition	or is an afficiate or constitue	[(b) (b), (b) (<i>(</i> (C)	
none	and organization of which related	al 12 de dividado di compando	to the real set has divisited	100	
(b) (6), (b) (7)(C)	12e. Cell No.	12f. Fax No.		(b) (6), (5177VC)
13. Representative of the Petitioner w					b) (7)(C)
	no with accept service of all papers	ror purposes of the repres	sentation proceed	ng.	•
o) (6), (b) (7)(C)		(b) (6), (b) (7)(C	d number city, state	sand ZIP code	
and the state of t	13d, Cell No.	ISO. PAKNO.	,		(b) (7)(C)
(6) (6), (6) (1)(6)				(b) (b), (b) (1)(O)
I declare that I have read the above pe	dition and that the statements are t	true to the best of my know	wiedge and belief.		
(b) (6), (b) (7)(C)		(b) (6), (b) (7)		Date	3/8/2018
	ME(b) (6), (b) (7) LCAN SE	(b) (b), (b) (7)		1	
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Shannon Davis

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE				
Case No.	Date Filed	Ī		
10-RC-220145	05/14/2018			

5/14/2018

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

Name of Employer

| 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2a. Name of Employer **Duck River Electric Membership Corporation** 1411 Madison Street, Shelbyville, TN 37160 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Michael Watson, President & Chief Executive Officer Same 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 931-684-4621 931-909-1287 N/A mwatson@dremc.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service **Public Utility** Electric Power Provider Shelbyville, TN 6a. No. of Employees in Unit: 5b. Description of Unit Involved Included: All lineman, apprentice lineman, senior lineman, working foreman, senior working foreman, engineering aide and field engineers at the employer's Approximately 65 District Offices in Columbia, Decherd, Lewisburg, Manchester, Sewanee, Shelbyville, Chapel Hill, and Lynchburg Tennessee Facilities 6b. Do a substantial number (30% or more) of the employees in the Excluded: All other employees, including office clerical employees, professional employees, janitorial, grounds keeping, guards and supervisors as defined by unit wish to be represented by the Petitioner? Yes V No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 5/14/2018 and Employer declined recognition on or about not received (Date) (If no reply received, so state). No reply 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None N/A 8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address N/A N/A N/A N/A 8g. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A N/A 9, Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? IN/A (Name of labor organization) N/A , has picketed the Employer since (Month, Day, Year) N/A 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. N/A N/A 10f. E-Mail Address 10e. Fax No. N/A N/A 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: V Manual Mail Mixed Manual/Mail any such election. 11d. Election Location(s): 11b. Election Date(s): 11c. Flection Time(s): Monday 6/4/2018 7:30 a.m. to 9:00 a.m. See attachment "A" 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Brotherhood of Electrical Workers Local 429 2001 Elm Hill Pike, Nashville, TN 37210 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Electrical Workers 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 615-889-4429 615-419-2430 615-874-1253 sdavis@ibew429.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Shannon Davis, Assistant Business Manager 13b. Address (street and number, city, state, and ZIP code) 2001 Elm Hill Pike, Nashville, TN 37210 13c. Tel No. 13e. Fax No. 13d. Cell No. 13f. F-Mail Address 615-889-4429 615-419-2430 615-874-1253 sdavis@ibew429.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Date

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

Assistant Business Manager

PRIVACY ACT STATEMENT

Attachment "A"

Form NLRB-502 (RC) Box 11C Election Time(s)

Duck River Electric Membership Corporation

- Lewisburg District Office (Meeting Room) Lewisburg, TN 7:30am to 9:00am on 6/4/2018
- Shelbyville District Office (Auditorium) Shelbyville, TN 7:30am to 9:00am on 6/4/2018
- Manchester District Office (Auditorium) Manchester, TN 7:30am to 9:00am on 6/4/2018

FORM NLRB-502 (RC) (4-15)

> UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

Case No. 10-RC-220197

DO NOT WRITE IN THIS SPACE May 15, 2018

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) FreightCar America Inc. 1200 Haley Drive, Cherokee, Alabama 35616-5369 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Rodney Atkins, Human Resources Manager SAME 3f. E-Mail Address 3e. Fax No. 256-370-5500 ratkins@freightcar.net 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Cherokee, Alabama **FACTORY** Production of Railroad Freight Cars 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All FreightCar America Hourly Employees including Maintenance and Quality Assurance (QA). Also, all hourly Temp Service Employees 6b. Do a substantial number (30% or more) of the employees in the Excluded: All Salaried Employees, Supervisors, Office and Clerical, Security/Guards unit wish to be represented by the Petitioner? Yes ✓ No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address NONE 8f. E-Mail Address 8c. Tel No. 8d Cell No. 8e. Fax No. 8i, Expiration Date of Current or Most Recent 8h. Date of Recognition or Certification 8g. Affiliation, if any Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10d. Cell No. 10a. Name 10b. Address 10c Tel No. 10f. E-Mail Address 10e. Fax No. 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: Manual Mail Mixed Manual/Mail any such election. 11d Election Location(s): 11b. Election Date(s) 11c. Election Time(s) North and South Break Rooms 1:00 pm - 5:00 pm CST June 6, 2018 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 8882 Red Creek Drive S. Semmes, Alabama 36575-4474 International Association of Sheet Metal Air Rail Transportation Workers (SMART) 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) NONE 12e, Cell No. 12f. Fax No. 12g. E-Mail Address 12d. Tel No. 251-752-2616 251-752-2616 tfisher@smart-union.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Thomas Eugene Fisher 13b. Address (street and number, city, state, and ZIP code) 8882 Red Creek Drive S, Semmes, Alabama 365875-4474 13d. Cell No. 13f. E-Mail Address 13c. Tel No. 13e Fax No. tfisher@smart-union.org 251-752-2616 251-752-2616 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) ignature May 15, 2018 SMART International Representative Thomas Eugene Fisher

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

any such election. 11b. Election Date(s):

12a. Full Name of Petitioner (including local name and number)

6/15/18

12d. Tel No.

(412) 562-2529

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE			
Case No. 10-RC-220689	Date Filed 5-22-18		

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of; (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2a. Name of Employer Coilplus 426 Chimney Rock Rd., Greensboro, NC 27409 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Anthony Burton, Plant President Same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (336) 533-1308 ext. 208 (336) 312-1575 (336) 299-9882 Aburton@coilplus.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: factory/warehouse produce steel product and steel coil inventory Greensboro, NC 6a. No. of Employees in Unit: 5b. Description of Unit Involved Included: All full-time and regular part-time production and maintenance employees at the Employer's facility in Approximately 45 6b. Do a substantial number (30% Greensboro, NC or more) of the employees in the Excluded: All temporary employees, office clerical and professional employees, guards, and supervisors as defined in the Act unit wish to be represented by the Petitioner? Yes ✓ No 7a. Request for recognition as Bargaining Representative was made on (Date) hv netition and Employer declined recognition on or about Check One: (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address None 8c, Tel No. 8d Cell No. 8e Fax No. 8f. E-Mail Address 8h. Date of Recognition or Certification 8g. Affiliation, if any 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9, is there now a strike or picketing at the Employer's establishment(s) involved? No. _ If so, approximately how many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10d. Cell No. 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: / Manual Mixed Manual/Mail Mail

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Brad Manzolillo, USW Organizing Counsel 13b. Address (street and number, city, state, and ZIP code)

11c, Election Time(s):

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied & Industrial Service Workers International Union, AFL-ClO, CLC

12e. Cell No.

(412) 418-4333

5 - 7 a.m. and 2 -3:30 p.m.

60 Boulevard of the Allies, Five Gateway Center Room 913Pittsburgh, PA 15222

11d. Election Location(s):

12b. Address (street and number, city, state, and ZIP code)

12g. E-Mail Address

bmanzolillo@usw.org

60 Boulevard of the Allies, Five Gateway Center Room 913Pittsburgh, PA 15222

main break room

13c. Tel No. 13d. Cell No. 13e, Fax No. 13f. E-Mail Address (412) 562-2529 (412) 418-4333 (412) 562-2555 bmanzolillo@usw.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied & Industrial Service Workers International Union, AFL-CIO, CLC

Name (Print) Date Mllo Brad Manzolillo

Organizing Counsel 5/22/18
WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

12f. Fax No.

(412) 562-2555

PRIVACY ACT STATEMENT

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
10-RC-221571	06/07/2018				

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 238 W 2nd St J T Thorpe & Sons Inc. 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 238 W 2nd St KY Maysville 41056 Vernon Decker 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (606) 564-3773 (606) 407-1350 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Construction Services Refractory Hawesville, KY 5b. Description of Unit Involved 6a. No. of Employees in Unit: 5 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. F-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to Mail Mixed Manual/Mail 11a. Election Type: Manual any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 6/19/2018 Noon Lewisport, KY 12b. Address (street and number, city, state, and ZIP code) 12a. Full Name of Petitioner (including local name and number) 9700 Lower River Rd KY Louisville 40272-3719 Lonnie Calvert LIUNA Local 1392 12c. Full name of national or international labor organization of which Petitioner is an affiliate or consituent (if none, so state) Kentucky 12g. E-Mail Address lcalvert@ovssr.org 12d Tel No 12e. Cell No. 12f. Fax No. (502) 995-3725 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) 13c Tel No. 13d Cell No. 13e Fax No. 13f F-Mail Address I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date Lonnie D. Calvert 06/6/2018 15:05:19

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Attachment

DO NOT WRITE IN THIS SPACE				
Case	Date Filed			
10-RC-221571	06/07/2018			

Employees Included All laborers that perform general labor and tending of masons

Employees Excluded Masons, supervisors, and management

FORM NLRB-502 (RC) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **RC PETITION**

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
10-RC-221944	6/13/18				

INSTRUCTIONS: Unless e-Filed using the Agency's website. | www.nfrb.gov/], submit an original of this Petition to an NLRB office in the Region in which the

employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.						
PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.						
2a. Name of Employer:	2b. Address(es) of Establishment(s) involved	(Street and number, City	, State, ZIP code):			
Odson Pest Control 3a. Employer Representative - Name and Title:	435 Ann Street 3b. Address (if same as 2b - state same):	Fayettville	., NC 28301			
Clycle Odom-Manager	San	ne				
844 501 5083 910-764-60	062 910 678 0639	3f. E-Mail Address	40 clodsonbros,			
4a. Type of Establishment (Factory, mine, wholesaler, etc.)	4b. Principal Product or Service	5a. City ar	d State where unit is located:			
5b. Description of Unit Involved:	Pest Control 5	6a. Number	er of Employees in Unit:			
Sb. Description of Unit Involved: Included: All Commission pest con Commission outside sale	Acpresontative.	011	8			
Excluded: HII Termite technicions	GIBLICAL CLIBANICA	6b. Doas	ubstantial number (30% or more) employees in the unit wish to be			
Check One: 72. Request for recognition as Bargaining Reprise on or about (Date) 6-13-20/8/16 m	o reply received, so state).	Ω_{α}	ented by the Petitioner? Yes No declined recognition			
7b. Petitioner is currently recognized as Bargain 8a. Name of Recognized or Certified Bargaining Agent (If none		der the Act.				
BE. Tel. No. Bd. Cell No.	P.O. BOX 347 CA	emons, Nc.	GIOFG			
Page 1997						
336-918-0940 Bg. Affiliation, if any:	8h. Date of Recognition or Certification	8i. Expiration Date of Contract, if any				
9. Is there now a strike or picketing at the Employer's establishme	nt(s) involved? \(\rightarrow\) \(\rightarrow\) If so, approximat	tely how many employee				
(Name of Labor Organization)			er since (Month, Day, Year)			
Organizations or individuals other than Petitioner and those national individuals known to have a representative interest in any employer.			es and other organizations and			
10a. Name 10b. Address	MOLIC	10c. Tel. No.	10d. Cell No.			
		10e. Fax No.	10f. E-Mail Address			
11. Election Details: If the NLRB conducts and election in this man	atter state your position with respect to any ave	ah alaation: 11a Floria	n Tyrne:			
June 28. 2018 Emplaie						
11b. Election Date(s): 11c. Election Tir	00 -	11d. Election Location(s				
12a. Full Name of Petitioner (including local name and number):	12b. Address (street and	number, city, State and	ZIP code):			
WECH local 204 AFLCIOICIC P.O. Box 347 Clemons, NC 27012						
12c. Full name of national or international labor organization of with 12c. Food 3. Commercial	Norker's Internation		ON AFLICTOICLE.			
12d. Tel. No. 12e. Cell No. 334 918-10940	12f. Fax No.	12g. E-Mail Address				
13. Representative of the Petitioner who will accept service o 13a. Name and Title:	f all papers for purposes of the representati 13b. Address (street and number, cit	ion proceeding.	ledy warmin tom			
David Kennedy-Secretary of Treas P.D. Box 347 Clemons, NC 27012						
13c. Tel. No. 336-993-890 ufcw Kennedy Panal, com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.						
Name (Print) Steven MARAS Signature	Title		e presentative filet			

FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

	TE IN THIS SPACE	W.8
Case No.	Date Filed	
10-RC-222088	6-15-2018	

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov, submit an original of this Petition to an NLRB office in the Region In which the employer concerned is located. The petition must be accompanied by both a showing of Interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2a. Name of Employer 784 Highway 74 S Peachtree city Georgia 30269 ADC LTD NM 3b. Address (If same as 2b - state same) 3a. Employer Representative - Name and Title 2100 Air Park RD SE, Suite 120 Albuquerque, NM 87106 Phillip Cordova 3f. E-Mall Address 3d. Cell No. 3c, Tel, No. Pcordova@adcltdnm.com 505-503-7720 505-259-6877 505-265-5800 5a. City and State where unit is located: 4b. Principal product or service 4a. Type of Establishment (Factory, mine, wholesaler, etc.) Peachtree GA Security FAA 6a. No. of Employees in Unit: 5b. Description of Unit Involved Included: all fulltime and part time armed and unarmed security officers employed by the employer 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit wish to be represented by the clerical, managerial, salaried, and supervisory personel as defined by the act Petitioner? Yes ✓ No 7a. Request for recognition as Bargaining Representative was made on (Date) NA and Employer declined recognition on or about Check One: (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address NA NA 8f. E-Mall Address 8d Cell No. 8e. Fax No. 8c. Tel No. NA NA NA NA 8i, Expiration Date of Current or Most Recent 8h. Date of Recognition or Certification 8g. Affillation, if any Contract, if any (Month, Day, Year) NA NA If so, approximately how many employees are participating? NA 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA , has picketed the Employer since (Month, Day, Year) NA (Name of labor organization) NA 10. Organizations or Individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10d. Cell No. 10c. Tel. No. 10b. Address 10a. Name NA NA 10f. E-Mall Address 10e, Fax No. NA NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: 🗸 Manual Mall_ Mixed Manual/Mail any such election. 11d. Election Location(s): 11c. Election Time(s): 11b. Election Date(s): work site, or a location near work site 0500-0700, 1300-1500 first avallable 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 12a, Full Name of Petitioner (including local name and number) United Government Security Officers of America and its Local 297 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Government Security Officers of America International Union 12g. E-Mall Address 12e. Cell No. 12f. Fax No. 12d, Tel No. Mieblanc@ugsoa.com 617-620-7225 NA 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Mika LeBlanc DHS Vice President UGSOA International Union 2879 Cranbarry Highway East Wareham, MA 02538 13d, Cell No. 13e. Fax No. 13f, E-Mail Address Miebienc@ugsoa.com 617-620-7225 617-620-7225 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) DHS Vice President UGSOA International Union Mike LeBlanc

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
10-RC-22290	04 June 28, 2018				

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) MacLean Power Systems 1909 Highway 87, Alabaster, AL 35007 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Lisa Glander, HR Manager SAME AS ABOVE 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f E-Mail Address 205-685-5447 847-417-0235 lglaner@macleanpower.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Alabaster, AL foundry electrical components 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All full-time and regular part-time production and maintenance employees 6b. Do a substantial number (30% or more) of the employees in the Excluded: All office clerical employees, professional employees, guards, and supervisors defined in the Act. unit wish to be represented by the Petitioner? Yes [X] No [and Employer declined recognition on or about Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) _ (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None 8d Cell No. 8e. Fax No. 8f E-Mail Address 8c Tel No 8i. Expiration Date of Current or Most Recent 8h. Date of Recognition or Certification 8g. Affiliation, if any Contract, if any (Month, Day, Year) If so, approximately how many employees are participating? 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None 10c. Tel. No. 10d. Cell No. 10h Address 10a Name None 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to Mixed Manual/Mail 11a. Election Type: Manual any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 4:00-6:00 pm employee break room July 17, 2018 12b. Address (street and number, city, state, and ZIP code) 12a. Full Name of Petitioner (including local name and number) 1909 Highway 87, Alabaster, AL 35007 United Steelworkers 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Steelworkers 12g. E-Mail Address 12e. Cell No. 12f. Fax No. 12d. Tel No. 205rleague@usw.org 205-631-0137 205-276-6849 (League) msmith@usw.org 205-602-3282 (Smith) 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) Raymond League, International Staff Representative SAME AS ABOVE Michael Smith, International Sub-District Director 13f. E-Mail Address 13e. Fax No. 13c. Tel No. 13d. Cell No. SAME AS ABOVE SAME AS ABOVE SAME AS ABOVE SAME AS ABOVE I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Signature International Staff Representative · Raymond League

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

FORM NLRB-502 (RC) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE						
Case No.	10-RC-223394	Date Filed 7/10/18				

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INSTRUCTIONS: Unless e-Filed u employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48	he petition me named in the	ust be accomp petition of: (1	panied by 1) the pet	both a sh ition; (2) S	owing of interest (see tatement of Position for	6b below) and orm (Form NLI	l a certificat RB-505); an	e of service showing se d (3) Description of Rep	ervice on presentation	
PURPOSE OF THIS PETITION: I bargaining by Petitioner and Petit requests that the National Laboratory	ioner desires t	o be certified a	s represe	ntative of th	e employees. The Petit	tioner alleges	that the foll	owing circumstances e		
2a. Name of Employer:	WW E.		2b. Addr	ess(es) of	Establishment(s) involve	ed (Street and r	number, City	State, ZIP code):		
Electronic Metrology Labora	tory, LLC		,		C 1					
			1		See attached	d page.				
3a. Employer Representative - Nan	ne and Title:		3h Addi	acc (if cam	a ac 2h stata camal:					
Mike Courter	ne una riac.	2		3b. Address (if same as 2b - state same): 318 Seaboard Lane, Suite 106 Franklin, TN 37067						
3c. Tel. No.	3d. Cell No.		<u>' </u>	3e. Fax No).	3f. E-Mail A	3f. E-Mail Address			
270-348-0546	270-348-0	546	- 1	615-771	-2551	mike.cou	mike.courter@eml1.com			
4a. Type of Establishment (Factory,	mine wholesa	ler. etc.)		4b. Princip	al Product or Service			d State where unit is loca	ated:	
Government Contractor		,,			Services		1	and Winston Salem		
5b. Description of Unit Involved:								r of Employees in Unit:	,	
Included: All Full time and other employe	es- Chief E	ngineer, Lea	d Maint	enance N	lechanic, Maintenan	ce Mechani	200 200 70	lle (4) Winston	Salem (3)	
Excluded:		- T						ubstantial number (30% o		
Guards, Supervisors and Man	agers as de	fined in the	Act					mployees in the unit wislented by the Petitioner? [
Check One: 🔀 7a. Request for rec	•			was made	on (Date) 7/10	/18 and		leclined recognition	A 165 140	
on or about (Date)				ceived, so						
	, ,				nd desires certification	under the Act.				
8a. Name of Recognized or Certific	ed Bargaining	Agent (If none	e, so state	8b. Ad	dress:					
8c. Tel. No.	8d. Cell No.			8e. Fax No).	8f. E-Mail A	8f. E-Mail Address			
8g. Affiliation, if any: 8h. D			. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)			1				
9. Is there now a strike or picketing a	t the Employee	re establishme	nt/c) invol	vod2 No	If so approvin	nately how man	v employee	s are participating?		
	t trie Employer	s establishme	111(5) 11140	Men 140				10) 100 100 100 100 100 100 100 100 100		
(Name of Labor Organization)						, has picketed	the Employ	er since (Month, Day, Ye	ar)	
 Organizations or individuals other individuals known to have a representation. 								es and other organization	s and	
10a. Name	110	Ob. Address				10c. Tel. No).	10d. Cell No.		
							100.00.110.			
				10e. Fax No			o. 10f, E-Mail Address			
	1						J. Landi Addios			
11. Election Details: If the NLRB co	nducts and ele	ection in this ma	atter, state	vour posit	ion with respect to any s	such election: I	11a, Electio	n Type:		
							☐ Manua		Manual/Mail	
11b. Election Date(s):	11	1c. Election Tin	ne(s):	(s):		11d. Election	11d. Election Location(s):			
7/18/18, 7/19/18 or 7/23/18 thr	and the Street of the Street o						and Winston Salem sites			
12a. Full Name of Petitioner (include					12b. Address (street ar					
International Union of Opera				65	P.O. Box 15250 E			3343).		
12c. Full name of national or internat International Union of Operatin			nich Petitio	oner is an a	ffiliate or constituent (if	none, so state)		A DOLLAR		
12d. Tel. No. 12e. Cell No. 12f.			12f. Fax No. 12g. E-Mail		il Address					
919-596-6869	919-943-7	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			iuoe465@frontier.com					
13. Representative of the Petitione	r who will acc	cept service of	f all pape	rs for purp	oses of the representa	ation proceedi	ng.			
사용사용사용사용사용 (CONTROL CONTROL CONTRO				13b. Addre	ess (street and number,	city, State and	ZIP code):			
David Atwater - Business Ma	anager/Pres	sident		P.O. 15	250 Durham, NC	27704				
13c. Tel. No.	13d. Cell No.		1		lo.	13f. E-Mail Address				
919-596-6869	[1] [1] [1] [1] [1] [2] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4					iuoe465@frontier.com				
I declare that I have read the above	e petition and	that the state	ments ar	e true to t	e best of my knowled	ge and belief.			-	
Name (Print)		Signature		1	4	Title ·	in the second	V212-22-2-4-1	Date	
David Atwater Ogn			in,	- AT	wolf !	Business Ma	nager/Pre	sident	7/10/18	

RC Petition, Electronic Metrology Laboratory, LLC, page 2

2b. Addresses:

- Veach Baley Federal Building 151 Patton Ave. Asheville, NC 28801
- Federal Building/Courthouse 100 Otis Street Asheville, NC 28801
- Hiram H. Ward Federal Building/Courthouse 251 North Main St. Winston-Salem, NC 27101

FORM NLRB-502 (RC) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE			
Case No.	Date Filed		
10-RC-223530	07/11/2018		

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 2a. Name of Employer: Hollander Sleep Products 660 National Turnpike Munfordville, KY 42765 3b. Address (if same as 2b - state same): 3a. Employer Representative - Name and Title: Michelle Eisner Same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 270-524-1509 270-524-5211 270-524-1518 4b. Principal Product or Service 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: Mattress Pads, Sleep Products Munfordville, KY Factory 5b. Description of Unit Involved: 6a. Number of Employees in Unit: Included: 220 All hourly, non-management areas, classifications, and positions 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? X Yes All salaried and managerial positions; other positions excluded by the NLRA Check One: X 7a. Request for recognition as Bargaining Representative was made on (Date) 7-10-18 and Employer declined recognition No Reply (If no reply received, so state). ☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state) 8b. Address: 8c. Tel. No. 8d. Cell No. 8e. Fax No. 8f. E-Mail Address 8g. Affiliation, if any: 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) -9. Is there now a strike or picketing at the Employer's establishment(s) involved? N_{O} If so, approximately how many employees are participating? 0 (Name of Labor Organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10f. E-Mail Address 10e. Fax No. 11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: 11a. Election Type: X Manual Mail Mixed Manual/Mail 11d. Election Location(s): 11b. Election Date(s): 11c. Election Time(s): 7-26-18 1-5pm Employer facility at 660 National Turnpike 12b. Address (street and number, city, State and ZIP code): 12a. Full Name of Petitioner (including local name and number): General Drivers and Warehousemen, Teamsters Local 89 3813 Taylor Blvd Louisville, KY 40215 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Brotherhood of Teamsters 12d. Tel. No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 502-439-0997 502-368-5885 jdennis@teamsters89.com 502-366-2009 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title: 13b. Address (street and number, city, State and ZIP code): 3813 Taylor Blvd Jay Dennis Assistant to the President/Organizing Director Louisville, KY 13f. E-Mail Address 13c, Tel, No. 13d. Cell No. 13e. Fax No. 502-439-0997 502-366-2009 jdennis@teamsters89.com 502-368-5885 ext. 133 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Signature Date Name (Print) Jay Dennis Assistant to the President 7-11-18

WILLFUL FALSE STATEMENTS ON THIS PATITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

International Union, Security, Police and Fire Professionals of America (SPFPA)

International Union, Security, Police and Fire Professionals of America (SPFPA)

13a. Name and Title Gordon Gregory, General Counsel

Signa

I declare that I have read the above petition a

12d. Tel No.

13c Tel No.

313-964-5600

Name (Print)

586-772-7250 X111

12e. Cell No.

586-872-5634

13d. Cell No.

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding

Case No. 10-RC-223992

Do NOT WRITE IN THIS SPACE

Date Filed

July 19, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 146 CCA Road Lumpkin, GA 31815 Core Civic 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Jeff Rainey - Managing Director-Employee Relations 10 Burton Hills Boulevard, Nashville, TN 37215 615-263-3140 jeff.rainey@corecivic.com 615-263-3000 5a. City and State where unit is located: 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service SECURITY AGENCY SECURITY Lumpkin, GA 6a. No. of Employees in Unit: 5b. Description of Unit Involved 300 Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED DETENTION OFFICERS, CORRECTIONS OFFICERS, TRANSPORTATION OFFICERS AND BAILIFFS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE 6b. Do a substantial number (30% or more) of the employees in the NATIONAL LABOR RELATIONS ACT, EMPLOYED BY CORE CIVIC @ 146 CCA ROAD, LUMPKIN, GA 31815. unit wish to be represented by the Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT. Petitioner? Yes ✓ No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). NONE 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address NONE 8c. Tel No. 8d Cell No. 8e. Fax No: 8f. E-Mail Address 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent 8g. Affiliation, if any Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10f. E-Mail Address 10e, Fax No. 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to Manual ✓ Mail Mixed Manual/Mail 11a. Election Type: any such election. 11d. Election Location(s): 11b. Election Date(s): 11c. Election Time(s): Mail 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code)

David L. Hickey

| Description of the Petition of the Petition

12f. Fax No.

586-772-9644

13e. Fax No.

313-964-2125

d that the statements are true to the best of my knowledge and belief.

25510 Kelly Road, Roseville, MI 48066

13b. Address (street and number, city, state, and ZIP code)

65 Cadillac Square, Suite 3727, Detroit, MI 48226

12g. E-Mail Address

organize@spfpa.org

13f. E-Mail Address

Gordon@UnionLaw.net

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary, however, failure to supply the information will cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRIT	E IN THIS SPACE
10-RC-226013	Date Filed August 21, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITIONED CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bergaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following dircumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b, Address(es) of Establishment(s) involved (afreet and number, city, state, zlp code) 2a. Name of Employer NATIONAL SECURITY ASSOCIATES, INC. 960 RIVERBEND RD., CUSSETA, GA 31805 3a. Employer Representative - Name and Title RAY REID - DIRECTOR OF MILITARY & LAW 3b. Address (If same as 2b - state same) (SAME AS ABOVE) **ENFORCEMENT TRAINING** 3d. Cell No. 3d. E-Mail Address 3e. Fax No. 3c. Tel. No. 706-329-8279 RAYREID@TEAMN\$A.COM 4a. Type of Establishment (Factory, mine, wholesaler. etc.) 5a, City and State where unit is located: roduct or MULTIPLE INTEGRATED LASER ENGAGEMENT SYSTEM CUSSETA, GA MILITARY TRAINING service: 6a. No. of Employees in Unit: 5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE 1-ET1 (ELECTRONICS TECH I) 6 6b. Do a substantial number (30% 2-ET2 (ELECTRONICS TECH II) AND 3-ET3 (ELECTRONICS TECH III) or more) of the employees in the unit wish to be represented by the OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, Petitioner? Yes 🗹 No 🔲 AS DEFINED IN THE ACT. Check One: 17a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about (date) (if no reply received, so state).

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.
8a. Name of Recognized or Certified Bargaining Agent (If none, so state).

8b. Name of Recognized or Certified Bargaining Agent (If none, so state).

8b. Name of Recognized or Certified Bargaining Agent (If none, so state). NONE N/A Tel. No. 8f, E-Mail Address N/A N/A N/A N/A 원교, Affiliation, if any 8h. Date of Recognition or Certification 91, Expiration Date of Current or Most Recent Contract, If any (Month, Day. Year) N/A N/A 9. Is there now a strike or picketing at the Employers establishment(s) involved? If so, approximately how many employees are participating? , has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or Individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10a Name 10b Address 10d. Celi No. 10c. Tel. No. N/A N/A N/A N/A 10e. Fax No. 10f. E-Mail Address N/A <u>El</u>ection Type: 11. Election Details: If the NERB conducts an election in this matter, state your position with respect to ✓ Manual Mail Mixed Manual/Mail 1(b. Election Date(s): 11c. Election Time(s); 11d. Election Location(s): HAMPTON INN SOUTH-FORT BENNING, 2870 S. 9/12/2018 4:00 PM ~ 5:30 PM LUMPKIN RD., COLUMBIA, GA 31903 (CONFERENCE 12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011 12 a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIÓ 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO 12d, Tel. No. 12e. Celi No. 12f. Fax No. 12g. E-Mail Address 817-459-0107 817-505-0100 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) JAMES R. LITTLE – GRAND LODGE SPECIAL REPRESENTATIVE 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011 13c Tel No. 13d. Cell No. 13e. Fax No. 13d. E-Mail Address 817-505-0100 682-401-7835 817-459-0107 JLITTLE@IAMAW.ORG I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature DATE GRAND LODGE REPRESENTATIVE 8/21/2018 JAMES R. LITTLE

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.0 § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the Information are fully set forth in the Federal Register, 71 Fed. Reg. 4842-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE				
Case No. 10-RC-226135	Aug. 22, 2018			

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KOT ETHION					1 1	U-IXC-22	10133		Aug	. 22, 2010	
INSTRUCTIONS: Unless e-Filed using the Agency's website, www.itlib.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.											
PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Labo	ioner desires to l	oe certified a	в гергева	ntative of	the employees. The	Petitio	ner alleges	that the follo	owing circumsta	MORS O	
2a. Name of Employer:			2b, Add	ress(es) of	Establishment(s) in	bevlovn	(Street and r	umber, City,	State, ZJP code)	:	
Haeco Americas			5568	Gumt	ree Road, W	insto	n Salem	, NC 27	107		
			8010	Piedn	nont Triad Pa	arkwa	ay, Gree	nsboro,	NC 27409		
3a. Employer Representative - Nan	ne and Title:		3b. Add	ress (if sar	ne as 2b - state sar	ne):					
Andy Halsey, Chief Hur Officer	nan Resor	ırces	5568	Gumt	ree Road, W	insto	n Salem	, NC 27	7107		
3c, Tel. No. 336-464-0122	3d. Cell No.			3s. Fax N			8f. E-Mell A ANDY.	HALSE	(@HAECO		
4a. Type of Establishment (Factory, I	mine, wholesale:	, etc.)			pal Product or Serv ft seat & inte		monuf		d State where un -Salem & Gre		
factory 5b. Description of Unit Involved:				allcra	it seat & mie	HOIS	manui.		r of Employees in		oro, NC
Included:									i or crubtovees in	Onic	
all production and main	tenance e	mplovee	es					170			
Excluded:								6b. Do a su	ibstantial number	(30% (or more)
managers, supervisors,	profession	nals, off	ice cle	ricals,	and guards			of the e	mployees in the inted by the Petiti	unit Wis	× Yes ☐ No
Check One: X 7a, Request for rec						n/a	and		leclined recogniti		
on or about (Date) 7b. Petitioner is cur				sceived, ac		ation un	der the Act				
8a. Name of Recognized or Certifie					ddress:	ation an	106) (107)(41				
None		**************************************									
8c. Tel. No.	8d. Cell No.		-	8e. Fax N	la.		8f. E-Mail Address				
8g. Affiliation, if any: 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)											
9. Is there now a strike or picketing at the Employer's establishment(a) involved? No 🕶 If so, approximately how many employees are participating?											
(Name of Labor Organization) , has picketed the Employer since (Month, Day, Year)											
10. Organizations or individuals other individuals known to have a repre	r than Petitioner esentative intere	and those no	emed in it ployees in	ems 8 and the unit d	9, which have clair escribed in item 5b	med rec above.	ognition as re (If none, so s	apresentetive state)	es and other orga	nization	s and
None	7740	n deluces					I don Tol No		104 Call No		
10а. Nвте	100	. Address					10c. Tel. No	٠.	10d. Cell No.		
							10e. Fax N	D	10f. E-Mall Addr	622	
11. Election Details: If the NLRB co	nducts and elec	ion in this m	etter, stal	e your pos	ition with respect to	any su	ch election:] Mixed	Manual/Mail
11b. Election Date(s):	250000	. Election Ti		l nd	-			n Location(s	50 DE DE DE		74 10 75 2000
Wednesday, September		7AM an		M					each local	tion	
12a, Full Name of Petitioner (Includ				= 3	12b. Address (str						
Int'l Assoc. of Machinists and Aerospace Workers 9000 Machinists Place, Upper Marlboro, MD 20772											
12c. Full name of national or international Association	ional labor organ on of Mach	nization of wh inists an	nich Petiti	ioner is an OSPACE	affiliate or constitue Workers	ent (If no	one, so state)	:			
12d. Tel. No. 12f. Fax No. 12g. E-Mall A (301) 967-4510 12g. E-Mall A											
13. Representative of the Petitione	r who will acce	pt service o	fall pap	ers for pu	poses of the repre	esentat	on proceed	ing.			
13a. Name and Title: William H. Haller, 'Associa	ate General	Counsel			ress (street and nur Machinists Pla				D 20772		
13c, Tel. No. 13d, Cell No. 13e, Fax N			No.		13f. E-Mall	Address					
(301) 967-4510					967-4594			@iama	w.org		
I declare that I have read the above	e petition and t	nat the state	ments a			owjedge					
Name (Print)		Signatur		QH	100	Tit	le				Date
William H. Haller			NL	7/14	tely	• A	ssociate	Genera	I Counsel		8/22/18

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE				
Case No. 10-RC-226505	Date Filed 8/30/18			

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 467 Zane Snead Dr VA Amherst 24521-4383 Buffalo Air Handling 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 467 Zane Snead Dr VA Amherst 24521-4383 Ted Krueger 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (434) 946-0226 tkrueger@buffaloair com (434) 946-7455 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Misc. Fabricated Products **HVAC Air Handling Units** Amherst, VA 5b. Description of Unit Involved 6a. No. of Employees in Unit: 80 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. F-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type:

Manual Mail Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): Company Facilities (Breakroom) ASAP 12a. Full Name of Petitioner (including local name and number)
Charles Kenneth Sewell
Charles K. Sewell Sheet Metal Air Rail and Transportation Workers (SMART) IOCAL 100 12b. Address (street and number, city, state, and ZIP code) 12c. Full name of national or international labor organization of which Petitioner is an affiliate or cons ituent (if none, so state) Sheet Metal Air Rail and Transportation Workers (SMART) 12g. E-Mail Address csewell@smart100.org 12d. Tel No. 12e. Cell No. 12f. Fax No. (443) 794-9359 (301) 967-1683 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) 13c Tel No. 13d Cell No. 13e Fax No. 13f F-Mail Address I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Date **Business Representative** Charles K. Sewell 08/27/2018 10:47:53 Charles Kenneth Sewell

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seg. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE				
Case		Date Filed		
	10-RC-226505	8/30/18		

Employees Included

Any and all buffalo employees, Including Temp Agency workers, who manufacture, assemble and service Buffalo Air Handling Products

Employees Excluded

Any and all office staff, excluding all subcontractors, (Southern Air and CRB Electric Inc.)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE		
Case No.	Date Filed	
10-RC-227236	September 12, 2018	

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2000 Communications Blvd Georgia Windstream, LLC 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 2000 Communications Blvd GA Baldwin 30511-1762 Jarrod Berkshire 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (706) 776-4275 j berkshire@windstream.com (330) 487-2763 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Communications Services Telecommunications Baldwin, GA 5b. Description of Unit Involved 6a. No. of Employees in Unit: 400 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: ___ Manual ___ Mail ___ Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): September 26, 2018 Harris Tower, 233 Peachtree Street, NE, Atlanta, GA 30303 10:00 12b. Address (street and number, city, state, and ZIP code) 12a. Full Name of Petitioner (including local name and number) Nick Hawkins Communications Workers of America, AFL-CIO, CLC 3516 Covington Hwy 12c. Full name of national or international labor organization of which Petitioner is an affiliate or consituent (if none, so state) Communications Workers of America, AFL-CIO, CLC 12g. E-Mail Address nhawkins@cwa-union.org 12d. Tel No. 12e. Cell No. 12f. Fax No. 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) Robert M Weaver Attorney Quinn, Connor LLP 3516 Covington Highway GA Decatur 30032-13c. Tel No. 13d Cell No. 13e. Fax No. 13f F-Mail Address rweaver@gcwdr.com (404) 299-1288 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date Robert M Weaver Attorney 09/12/2018 13:30:02 Robert M Weaver

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE				
Case	Date Filed			

Employees Included

All Technicians employed in the State of Georgia, including employees in the Customer Service Technician, Business System Technician, and Network Technician job classifications as of the date of the filing of this petition

Employees Excluded

All other employees employed in the State of Georgia, including employees in the Customer Service Representative, Assigner, Retail Sales Consultant, Customer Care Specialist, and Business Care Specialist job classifications as of the date of the filing of this petition, and also excluding Professional Employees, Engineers, Supervisors, all Clerical Employees and Guards

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

Case N				_	-
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- 1	0-R	(-2	227	XYI)

September 24, 2018

DO NOT WRITE IN THIS SPACE

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 100 Greenwood Industrial Parkway, McDonough, GA 30253 Luxottica Retail 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Lisa Shelton, Senior Manager Same 3d. Cell No. 3e. Fax No. 3f. E-Mail Address Ishelton@luxotticaretail.com 770-305-7400 5a. City and State where unit is located: 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service Factory and Warehouse design, manufacture and distribution of eyewear McDonough, GA 6a. No. of Employees in Unit: 5b. Description of Unit Involved Included: All full-time & regular part-time production, lab, maintenance, warehouse, retail, shipping and receiving and 6b. Do a substantial number (30% quality assurance employees, group leaders & team lead employees employed at the McDonough, GA facilities. or more) of the employees in the Excluded: All temporary, salaried, office clerical, & professional employees, contractors, guards and supervisors defined by the act. unit wish to be represented by the Petitioner? Yes ✓ No Request for recognition as Bargaining Representative was made on (Date) 9-21-2018, and Employer declined recognition on or about Check One: (Date) (If no reply received, so state). No 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address None 8f. E-Mail Address 8d Cell No. 8e. Fax No. 8c. Tel No 8i. Expiration Date of Current or Most Recent 8h. Date of Recognition or Certification 8g. Affiliation, if any Contract, if any (Month, Day, Year) If so, approximately how many employees are participating? 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10d. Cell No. 10c. Tel. No. 10a. Name 10b Address 10f. E-Mail Address None 10e. Fax No. 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: Manual Mail Mixed Manual/Mail any such election. 11c. Election Time(s): 11d. Election Location(s): 11b. Election Date(s): Thursday, Oct 4th and Friday, Oct. 5, 2018 Conference Room Building 1, Room ASC2-201 Building 2, NAS - Conference Room 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Retail, Wholesale & Department Store Union/UFCW Southeast Council 1838 Metropolitan Pkwy, SW, Atlanta, GA 30315 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) Retail, Wholesale & Department Store Union/United Food & Commercial Workers 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 12d. Tel No. 404-758-0865 678-507-6636 404-758-5628 rwdsusec@aol.com 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding 13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Greg Scandrett, Union Representative 1838 Metropolitan Pkwy, SW, Atlanta, GA 30315 13f. E-Mail Address 13c. Tel No. 13e. Fax No. 404-758-5628 404-758-0865 678-507-6636 rwdsusec@aol.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Title Date Name (Print) Signature **Greg Scandrett** Union Representative

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

10a. Name

None

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

Case No. 10-RC-228129

DO NOT WRITE IN THIS SPACE Date Filed **September 26, 2018**

10d. Cell No.

10f. E-Mail Address

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 4475 S. Fulton Pkwy, Building 5, Atlanta, GA 30349 **DHL Supply Chain**

3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Katrina McClendon, Human Resource Manager Same? 3d. Cell No 3e. Fax No. 3f. E-Mail Address 404-684-3400 470-625-2344 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Warehouse ... Logistics Atlanta, GA 5b. Description of Unit Involved .6a. No. of Employees in Unit: 56. Description of Unit Involved Included: All full-time & part-time warehouse, production, forklift operators, shipping, receiving, maintenance, leads, inventory control, cycle counters, and quality control employees employed at the Atlanta, GA facility 6b. Do a substantial number (30% or more) of the employees in the Excluded: All temporary, salaried, office clerical, & professional employees, contractors, guards and supervisors defined by the act. unit wish to be represented by the Petitioner? Yes ✓ No Request for recognition as Bargaining Representative was made on (Date) 09-26-2018 and Employer declined recognition on or about Check One: (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address 8f. E-Mail Address 8d Cell No. 8e Fax No. 8c. Tel No. 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent 8g. Affiliation, if any Contract, if any (Month, Day, Year) If so, approximately how many employees are participating? 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to			11a. Election Type	: Manual Mail Mixed Manual/Mail	
11b. Election Date(s): Tuesday, October 9, 2018				tion(s): located in facility	
12a. Full Name of Petitioner (Including local name and number) Retail, Wholesale & Department Store Union/UFCW Southeast Council			12b. Address (street and number, city, state, and ZIP code) 1838 Metropolitan Pkwy, SW, Atlanta, GA 30315		
12c. Full name of national or international la Retail, Wholesale & Department Store Un			t (if none, so state)		
12d. Tel No. 12e. Cell No. 12f. Fax No. 404-758-0865 678-507-6636 404-758-5628				12g. E-Mail Address rwdsusec@aol.com	
13 Representative of the Petitioner who	will accept service of all papers for	or purposes of the repres	entation proceeding	0.	

10c Tel No.

10e. Fax No.

known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10b. Address

13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Greg Scandrett, Union Representative 1838 Metropolitan Pkwy, SW, Atlanta, GA 30315

13d. Cell No. 13e Fax No. 13f. E-Mail Address rwdsusec@aol.com 404-758-0865 678-507-6636 404-758-5628 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Date Name (Print) 9/26/2018 **Greg Scandrett** Union Representative

WILLFUL FALSE STATEMENTS OF THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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FORM NLRB-502 (RC) (2-18)

Denise Moore

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN	THIS SPACE
Case No. 10-RC-228544	Date Filed 10-2-18

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 2a. Name of Employer: 109 T.W. Alexander Drive Durham, NC 27709 Taher, Inc. 3b. Address (if same as 2b - state same). 3a. Employer Representative - Name and Title: 5570 Smetana Drive Bruce Taher, President & CEO Minnetonka, Minnesota 55943 3f. E-Mail Address 3e. Fax No. 3d. Cell No. Tel. No. 952-945-0444 952-945-0505 5a. City and State where unit is located: 4b. Principal Product or Service 4a. Type of Establishment (Factory, mine, wholesaler, etc.) Research Triangle Park, NC Food Services Food Service Contractor 6a. Number of Employees in Unit: 5b. Description of Unit Involved: All non-supervisory food service employees of the Employer at the address in 2b Included: 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?

▼ Yes Excluded: All supervisory employees and all guards. and Employer declined recognition Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) (If no reply received, so state). on or about (Date) 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state) None 8f. E-Mail Address 8e. Fax No. 8d. Cell No. 8c. Tel. No. 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most 8g. Affiliation, if any: Recent Contract, if any (Month, Day, Year) If so, approximately how many employees are participating? 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No , has picketed the Employer since (Month, Day, Year) (Name of Labor Organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None 10d. Cell No. 10c. Tel. No. 10b. Address 10a. Name 10f. E-Mail Address 10e. Fax No. 11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: 11a. Election Type Election should be held as soon as possible. 11d. Election Location(s): 11c. Election Time(s) 11b. Election Date(s): 109 T.W. Alexander Dr., Durham, NC 4:30 pm 2:30 Dm 12b. Address (street and number, city, State and ZIP code): P.O. Box 370 12a. Full Name of Petitioner (including local name and number): Industrial Technical & Professional Employees Union, Spring Lake, NC 28390 OPEIU Local 4873, AFL-CIO 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) Office & Professional Employees International Union 12g. E-Mail Address 12f. Fax No. 12d. Tel. No. 12e. Cell No. denise.moore@itpeu.org 910-497-1674 910-497-1661 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, State and ZIP code): 13a. Name and Title: 80 8th Avenue, Suite 1806 Sidney H. Kalban, Union Counsel New York, N.Y. 10011 13f. E-Mail Address 13e. Fax No. 13d, Cell No. 13c. Tel. No. itpeulaw@gmail.com 212-868-5869 212-868-5867 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Signature 09/26/18 Name (Print)

Maore

ITPEU Representative

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE			
Case No. 10-RC-228586	Date Filed October 3, 2018		

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Centerra /Ahtna 7 Frankford Ave Anniston AL 36201 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Pinkey Morris /NA 7121 Fairway Drive Suite 301 Palm Beach Gardens FL 33418 / 110 West 38th Ave Suite 100 Anchorage Alaska 99503 3c. Tel. No. 3d. Cell No. 3f. E-Mail Address 561-472-0600 /907-868-825 0 NA /NA 561-472-3679 /907-868-828 5 gerard.neville@triplecanopy.com /NA 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Fort McClellan Army Depot Anniston AL Security 5b. Description of Unit Involved 6a. No. of Employees in Unit: 45 Included: all fulltime and part time armed and unarmed security officers employed by the employer 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit wish to be represented by the clerical, managerial, salaried, and supervisory personel as defined by the act Petitioner? Yes / No Request for recognition as Bargaining Representative was made on (Date) NA Check One: and Employer declined recognition on or about (Date) (If no reply received, so state). NA Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address NA NA 8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address NA NA 8g. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) NA NA 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA If so, approximately how many employees are participating? NA (Name of labor organization) NA , has picketed the Employer since (Month, Day, Year) NA 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a, Name 10b. Address 10c. Tel. No. 10d. Cell No. NA NA 10e. Fax No. 10f. E-Mail Address NA NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type:

Manual Mail Mixed Manual/Mail any such election. 11c. Election Time(s): 11b. Election Date(s) 11d. Election Location(s): 0500-0700, 1300-1500 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) United Government Security Officers of America and its Local 299 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Government Security Officers of America International Union 12g. E-Mail Address 12d. Tel No 12e. Cell No 12f. Fax No. 617-620-7225 617-620-7225 NA Mleblanc@ugsoa.com 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 13d. Cell No 13f. E-Mail Address 13e, Fax No. 617-620-7225 617-620-7225 NA Mleblanc@ugsoa.com I declare that I have read the above petition and that the are true to the best of my knowledge and belief. Name (Print) Date Mike LeBlanc DHS Vice President UGSOA International Union | 10/02/18

WILLFUL FALSE STATEMENTS OF THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

10/22/18

FORM NLRB-502 (RC) (2-10)

Marisol Urena

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE			
Case No. 10-RC-229692	Oct. 22, 2018		

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirt.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Patitioner and Patitioner desires to be certified as representative of the employees. The Patitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) Involved (Street and number, City, State, ZIP code): 2a. Name of Employer: 9200 Energy Lane Northport, AL 35476 Stresscrete, Inc. 3b. Address (if same as 2b - state same): 3a. Employer Representative - Name and Title: Ken Johnson 3f. E-Mail Address 3e, Fax No. 3c. Tel. No. 3d. Cell No. 2053394840 Sales@stresscrete2.com 2053390711 5a. City and State where unit is located: 4b. Principal Product or Service 4a. Type of Establishment (Factory, mine, wholesaler, etc.) Northport, AL Concrete poles Warehouse 6a. Number of Employees in Unit: 5b. Description of Unit Involved: Included: 39 Full-time and part-time Caging, Pouring, Finishing, Setup, Crane operator, Yard man, Hookup, Welding 6b. Do a substantial number (30% or more) Excluded: of the employees in the unit wish to be represented by the Petitioner? 🗵 Yes Office, Clerical and Management Check One:

7a. Request for recognition as Bargatning Representative was made on (Date) on or about (Date) 10-22-18 (If no reply received, so state). 10-22-18 and Employer declined recognition 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8b. Address: 8a. Name of Recognized or Certified Bargaining Agent (If none, so state) 1901 10th Avenue South Birmingham, AL 35205 Retail, Wholesale and Department Store Union 8e. Fax No. 8f. E-Mail Address 8d, Cell No. Bc. Tel. No. bmurphree@rwdsumidsouth.org 2054827237 2053228447 2053227462 8i. Expiration Date of Current or Most 8h. Date of Recognition or Certification 8g. Affillation, if any: Recent Contract, if any (Month, Day, Year) None If so, approximately how many employees are participating? 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No , has picketed the Employer since (Month, Day, Year) (Name of Labor Organization) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in Item 5b above. (If none, so state) 10c. Tel. No. 10d. Cell No. 10b. Address 10a Name 10f. E-Mall Address 10e, Fax No. 11. Election Details; If the NLRB conducts and election in this matter, state your position with respect to any such election; 11a, Election Type: 11d, Election Location(s): 11c. Election Time(s): 11b. Election Date(s): 9200 Energy Lane Northport, AL 35476 11/12/18 5:00-8:00 am & 2:00-5:00 pm 12b. Address (street and number, city, State and ZIP code): 12a. Full Name of Petitioner (Including local name and number): 1901 10th Avenue South Birmingham, AL 35205 Retall, Wholesale and Department Store Union 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Retail, Wholesale and Department Store Union International 12g, E-Mall Address 12f. Fax No. 12d. Tel. No. 12e. Cell No. 2126845300 2127792809 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, State and ZIP code): 13a. Name and Title: 1901 10th Avenue South Birmingham, AL 35205 Marisol Urena, RWDSU Representative 131, E-Mail Address 13e, Fax No. 13c. Tel. No. 13d Cell No. bmurphree@rwdsumidsouth.org 2053228447 2054827237 2053227462 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Date Name (Print)

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

arusos

RWD\$U Representative

Name (Print)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD DO NOT WRITE IN THIS SPACE

10-RC-229737

October 23, 2018

Gordon@UnionLaw.net

RC PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Paragon Systems, Inc. various U.S. Government facilities throughout North Carolina

3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Laura Hagan - VP/General Counsel 13655 Dulles Technology Drive. Suite 100, Herndon, VA 20171 3f. E-Mail Address 865-266-0383 703-579-1576 lhagan@parasys.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: SECURITY AGENCY SECURITY statewide locations in North Carolina 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED SECURITY OFFICERS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, EMPLOYED BY PARAGON SYSTEMS, INC @ VARIOUS U.S. GOVERNMENT FACILITIES THROUGHOUT THE STATE OF NORTH CAROLINA UNDER CONTRACT HSHQE4-12-D-00006 WITH THE DEPARTMENT OF HOMELAND SECURITY AND FEDERAL PROTECTIVE 147 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT. Petitioner? Yes ✓ No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state).

/ D.	retitioner is currently recognized as barga	aining Representative and desi	res certification under	ille Act.	The second secon	
8a. Name of Recognized or The Protection & Response	Certified Bargaining Agent (If none, so Officers of America Inc.		s Exchange, Suite 100,	Atlanta, GA 30339		
8c. Tel No. 888-889-7762	8d Cell No.	8e. Fax No. 404-759-2078		8f. E-Mail Address admin@proaunion.org		
8g. Affiliation, if any		8h. Date of Recognition	n or Certification		te of Current or Most Recent Month, Day, Year)	
Is there now a strike or pick (Name of labor organization)	eting at the Employer's establishment(s) i n)	nvolved? NO If so, applications and the second s	proximately how many se (Month, Day, Year)		cipating?	
	Is other than Petitioner and those named the interest in any employees in the unit de			epresentatives and o	ther organizations and individ	als
10a. Name	10b. Address		10c. Tel. No.		10d. Cell No.	
				1000		$\overline{}$

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
	1	10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB co	nducts an election in this matter, state your position with respect to	11a. Election Type:	Manual Mail Mixed Manual/Mail
11b. Election Date(s): 11/12/18	11c. Election Time(s): MAIL	11d. Election Location(s): MAIL	
12a. Full Name of Petitioner (include International Union, Security, Police	ling local name and number) and Fire Professionals of America (SPFPA)	12b. Address (street and 25510 Kelly Road, Rosey	number, city, state, and ZIP code) rille, MI 48066

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union, Security, Police and Fire Professionals of America (SPFPA)

12d. Tel No. 12e. Cell No. 12a. E-Mail Address 586-772-7250 X111 586-872-5634 586-772-9644 organize@spfpa.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Gordon Gregory, General Counsel 13b. Address (street and number, city, state, and ZIP code) 65 Cadillac Square, Suite 3727, Detroit, MI 48226 13c. Tel No. 13d. Cell No. 13e, Fax No. 13f. E-Mail Address

313-964-5600 313-964-2125 I declare that I have read the above petition/ar that the statements are true to the best of my knowledge and belief.

22 International President David L. Hickey WILLFUL FALSE STATEMENTS OF THIS PERMION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

RIVACY ACT STATEMENT Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC) (4-15)

> UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WR	ITE IN THIS SPACE		
Case No.	Date Filed		
10-RC-230018	10/29/1	18	

101	- 1 1 1	1014			110 200010			
INSTRUCTIONS: Unless e-File	d using th	e Agency's webs	ite, <u>wv</u>	ww.nirb.gov, submit a	an original of this	Petition to	an NLRB o	ffice In the Region
in which the employer concern								
of service showing service on (Form NLRB-505); and (3) Desi								
with the NLRB and should not					ND 4012). The Si	iowing or in	telest sun	ulu olliy be liled
1. PURPOSE OF THIS PETITION: RO	-CERTIFIC	ATION OF REPRES	ENTATI	VE - A substantial number	of employees wish to	be represente	d for purpose	as of collective
bargaining by Petitioner and Petition requests that the National Labor	ner desires to	o be certified as repr	esentativ	ve of the employees. The	Petitioner alleges th	at the followin	g circumsta	inces exist and
2a. Name of Employer			2b. Ad	dress(es) of Establishmen	nt(s) involved (Street a	nd number, city		
Duke Energy			9550	Research Drive C		262	_	
3a. Employer Representative – Nam Jay Alvaro Vice-President h		Resources		3b. Address (If same at 139 East Fourth \$		ti, Ohio 45	202	
3c. Tel. No. 513-287-2649		ell No. 287-2649		3e. Fax No.			@duke-e	energy.com
4a. Type of Establishment (Fáctóry, m. Energy Control Center	ne, wholesa			duct or service SMISSION			and State w itte, NC	here unit is located:
5b. Description of Unit Involved Included: All full-time Associate	e System	Operators; Sys	em Op	perators I, System O	perators II, Senio	r System	6a. No. of 42	Employees In Unit:
Operators and Lead Excluded: All guards and supe	System (Operators report	ing to I	Managers Daniel Ste	evens and John L	yerly.	or more) of unit wish t	ubstantial number (30% of the employees in the be represented by the
not rec	ieved	_(Date) (If no reply	received	tive was made on (Date) 1 d, so state). no reply epresentative and desires		100	dined recogn	ltion on or about
8a. Name of Recognized or Certified N/A	Bargaining	Agent (If none, so	state).	8b. Address N/A				
8c. Tel No. N/A	Bd Ce N/A	ell No.		Be. Fax No.		8f. E-Mail Add	dress	
8g. Affiliation, If any N/A		******	18	8h. Date of Recognition o	r Certification	8i. Expiration Contract, if an N/A		ent or Most Recent ay, Year)
9. Is there now a strike or picketing at t (Name of labor organization) N/A	he Employe			? No If so, approx	dmately how many en Month, Day, Year) N		articipating?	N/A
Organizations or individuals other t known to have a representative interes none	han Petition t in any emp	er and those named doyees in the unit de	in Items- scribed I	8 and 9, which have claim in Item 5b above. (If none	ed recognition as rep , so state)	resentetives an	d other orga	nizations and individuals
10a. Name		10b. Address			10c. Tel. No. N/A		10d. Cel	No.
N/A		N/A			10e. Fax No. N/A		10f. E-M N/A	all Address
 Election Details: If the NLRB con any such election. 	ducts an ele	ction in this matter, s	tate you	r position with respect to	11a. Election Type		✓ Mail _	Mixed Manual/Mail
11b. Election Date(s): Mail Ballot See Attachment "A"		11c. Election Tim Mail Ballot See		ment "A"	11d. Election Local Mail Ballot See	Attachment "		
12a. Full Name of Petitioner (Includi International Brotherhood of Elec	trical Worl	kers Local 962			12b. Address (street) 325 West J.J. Dr	ive (Suite 11	oity, state, a 0) Greens	poro, NC 27406
12c. Full name of national or international Brotherhood of Elec	trical Work	ers "AFL-CIO"	etitioner		nt (if none, so stele)			1.1.2
12d. Tel No. 202-833-7000	336-4	Cell No. 48-8491		12f. Fax No.		12g. E-Mail A keith_rivers(···
13. Representative of the Petitioner 13a. Name and Title Keith Riv				13b. Address (street en 1056 W Bank St Winsto	d number, city, state,			*
13c. Tel No. 336-448-8491		Cell No. 148-8491		13e. Fex No.		13f. E-Mail Ackeith_rivers(
I declare that I have read the above	petition and	that the statement	s are tru	e to the best of my know	wledge and belief.			
Name (Print) Keith Rivers	Signature	4/16-	>	Title IBEW Lead Organize	er NC/SC	Date 10/29/18	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the Information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary, however, failure to supply the Information will cause the NLRB to decline to invoke its processes.

Attachment "A"

Form NLRB-502 (RC) Box 11C Election Time(s)

Duke Energy Control Center Operators

Petitioner believes the mail ballot option would be the least disruptive form of election for all parties involved. The System Operators unit consist of (2) groups of workers totaling approximately (43) employees. The proposed unit is made up of three-man crews working separate 12 hour "rotating" shifts (6am - 6pm & 6pm - 6am) seven days a week.

Because of these schedules, it would be extremely difficult if not impossible for the Board to conduct onsite elections in a manner that would be cost efficient for the Board and allow the majority of the employees to vote onsite before during or after their normally scheduled work day.

FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Çase No	Date Filed				
10-RC-230484	11/05/2018				

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITIONRC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) 2a. Name of Employer **RUAG SPACE USA** 100 ATLAS AVENUE, TRINITY, AL 35673 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 1101 MCMURTRIE DRIVE NW, STE D2, HUNTSVILLE, AL 35806 DAVID ROWE - GENERAL MANAGER 3d. E-Mail Address 3e. Fax No DAVID.ROWE@RUAG.COM 256-947-2504 5a. City and State where unit is located: 4a. Type of Establishment (Factory, mine, wholesaler. etc.) 4b. Principal product or service C13OJ FLIGHT SIMULATION **SIMULATORS** TRINITY, AL 6a. No. of Employees in Unit: 5b. Description of Unit Involved 23 ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE: PRODUCTION TECH, 6b. Do a substantial number (30% PRDUCATION LEAD, QUALITY TECHS, MATERIAL HANDLER, AND ADMINISTRATIVE SUPPORT SPECIALIST. or more) of the employees in the unit wish to be represented by the excluded: Petitioner? Yes V No OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT. Check One: 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about _____(date) (if no reply received, so state).

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address NONE N/A 8c. Tel. No. 8d, Cell No. 8e. Fax No F-Mail Address N/A N/A N/A N/A 8g. Affiliation, if any 81. Expiration Date of Current or Most Recent 8h. Date of Recognition or Certification Contract, if any (Month, Day. Year) N/A N/A N/A 9. Is there now a strike or picketing at the Employers establishment(s) involved? N/A If so, approximately how many employees are participating? , has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10d. Cell No. 10a Name 10b. Address 10c. Tel. No. N/A 10f. E-Mail Address N/A N/A 10e Fax No. N/A N/A Election Type 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election ✓ Manual Mail Mixed Manual/Mail 11d. Election Location(s): 11b. Election Date(s): 11c. Election Time(s): **NOVEMBER 29, 2018** 11:30 PM - 12:30 PM PAINT BOOTH 12 a, Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code, 690 E. LAMAR BLVD., SUITÉ 580, ARLINGTÓN, TX 76011 IAMAW, AFL-CIO 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO 12g. E-Mail Address 12d. Tel. No. 817-505-0100 12e. Cell No. 12f. Fax No. 817-459-0107 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) 13a Name and Title JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011 13c Tel No. 13d, Cell No. 13e. Fax No. 817-505-0100 682-401-7835 817-459-0107 JLITTLE@IAMAW.ORG I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief, Title_, DATE Name (Print) GRAND LODGE REPRESENTATIVE 11/05/2018 JAMES R. LITTLE

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.0 § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UGSOA

FORM NLRB-502 (RC) (4-15)

> UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

7746784658

DO NOT WRI	TE IN THIS SPACE
10-RC-230519	November 6, 20

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region In which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed

with the NLRB and shoul	d <u>not</u> be served on the	employer or ar	ov other party.	, , , , , , , , , , , , , , , , , , ,	(terest should only be med
bargaining by Petitioner and requests that the National I	N: RC-CERTIFICATION O	FREPRESENTAT	IVE - A substantlai numb	er of employees wish e Petitioner alleges	to be represente	d for purposes of collective
10 2 10 200 2 100 12 10 10 10 10 10 10 10 10 10 10 10 10 10		AN. A	uureas(es) of Establishme	ant(s) involved (Sizer	National Labor F	v State ZIP codel
Centerra /Ahtna		7 Fra	inkford Ave Annisto	n AL 36201		,, otato, 211 bode,
3a. Employer Representative -	- Name and Title	VAL	3b. Address (If same	as 2b – state seme)		***************************************
Pinkey Morris /NA			7121 Fairway Drive Suite 30	21 Palm Beach Gardens	FL 33418 / 110 West	38th Ave Suite 100 Anchorage Aleska 9950
3c. Tel. No. 561-472-0600 /907-868-8	3d. Cell No.	4	3e. Fax No.	*	3f. E-Mall Add	
40 7/00 01 5-1-15-1-17-17	3250 NA/NA		561-472-3679 /90	7-668-8285	gerard.nevi	ille@triplecanopy.com /NA
4a. Type of Establishment (Fact Fort McClellan Army Dep	ot	4b. Principal pro Security	duct or service	Š.		and State where unit is located:
5b. Description of Unit Involve	— pa st.	3	V 100	75		6a. No. of Employees in Unit:
Included: all full time and p	eart time armed and una	rmed alarm mor	nitors, alarm monitor l	eads, and securit	y guard leads	10
Excluded: clerical, mar	nagerial, salaried,	and superv	/isory personel	as defined by	y the act	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No
7b. Pe	A (Date) ('If no reply receive: d as Bergalpina D	d. so state) NIA			fined recognition on or about
NA NA	tilled sargaining Agent (if	none, so state).	8b. Address NA	s certification under t	ne Act.	•
8c. Tel No. NA	8d Cell No.		8e. Fax No,	HANN.	8f, E-Meil Add	ress
8g. Affiliation, If any	NA		NA		NA	PARTITO
NA			8h. Date of Recognition o	or Certification	Contract, if any	Date of Current or Most Recent y (Month, Day, Year)
9. la there now a strike or pickotir	ng at the Employer's establish	ment(s) (nyobred)	NIA Kan approx	wiscatala la la sur sur s	NA	
(Name of labor organization)	VΑ			ximately how many o		rticipating? IVA
		, nas pick	eted the Employer since ((Month, Day, Year) _	NA	
known to have a representative in NA	rterest in any employees in ti	e named in items i he unit described ji	8 and 8, which have clain n item 5b above. <i>(if non</i> e	ned recognition as re r, so state)	presentatives and	other organizations and Individuals
10a. Name	10b. Add	ress	*	10c, Tel. No.	·	1404 0-95
NIA	N I A			NA NA		10d. Cell No.
NA	INA.			10e. Fax No,	-	10f. E-Mail Address
11. Election Details: If the NLRS	Connectate		4,000	NA		NA
any such election. 11b. Election Date(s):		ction Time(s):	pasition with respect to	11a. Election Type	50 81	Mail Mixed Manual/Mali
first available	I 0500 ₂ 070	00 1300-1500		11d, Election Loca Worksite	ttion(s):	85
12a. Full Name of Petitioner (Inc United Government Security Offi	cluding local name and nur	mber)	_	12b. Address (street and number, city, state, and ZIP code)		ity, state, and ZIP code)
12c. Full name of national or inten United Government Security Offic	ational lebor organization of	which Detitioner le	an affiliate or constituen	t (if none, so state)	ignway Last vvai	enam, MA 02556
12d. Tej No. 317-620-7225	12e. Cell No.	<u> </u>	12f, Fax No.		12g, E-Mail Add	frass
	617-620-7225		NA		841-44	
13. Representative of the Petitio 13a. Name and Title Mike LeBland	DHS Vice President UGSOA Inl	e of all papers for emational Union	purposes of the repres 13b. Address (street and 2878 Cranberry Highway Es	number, city, state.	g. and ZIP code)	1955 A T
13c, Tel No.	13d, Cell No.		13e. Fax No.		13f. E-Mail Add	TASS
17-820-7225	617-620-7225		NA	9	Mieblanc@ugsc	oa.com
declare that I have read the abo	ove petition and that the st	tements are true	to the best of my know	ledge and bellef.	194	LON MODEL
Name (Print) /like LeBlanc	Signature		Title DHS Vice President UGS	OA International Uni	Date	A No.

WILLFUL FALSE STATEMENTS QUARTIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 at seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

Case No.

DO NOT WRITE IN THIS SPACE

10-RC-230716

November 8, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1, PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 463 Commerce Park Drive, SE, Marietta, Georgia 30060 First Transit, Inc. 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Joey McKelvey - General Manager same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address joey.mckelvey@firstgroup.com 770-429-7303 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Contractor Transit Marietta, GA 5b. Description of Unit Involved 6a. No. of Employees in Unit: 20 Included: All full-time and part-time maintenance and fueler employees 6b. Do a substantial number (30% or more) of the employees in the Excluded: Office clerical employees, professional employees, guards and supervisors as defined in the Act unit wish to be represented by the Petitioner? Yes V No and Employer declined recognition on or about Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8h Address none 8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8g. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? _ _ If so, approximately how many employees are participating? _ (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10c, Tel. No. 10d. Cell No. 10a. Name 10b Address 404-223-5122 678-612-8011 10e, Fax No. 10f, E-Mail Address bdunams@atu732.org 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a, Election Type: Manual Mail [Mixed Manual/Mail any such election. 11d. Election Location(s): 403 Commerce Park 11c. Election Time(s): 2018 CONFERENCE KM 7AM 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Amalgamated Transit Union Local 732 501 Pulliam Street, Suite 406, Atlanta, GA 30312 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12e, Cell No. 12f, Fax No. 12g. E-Mail Address 12d Tel No 404-223-5122 678-612-8011 bdunams@atu732.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Britt Dunams, Vice President 13b. Address (street and number, city, state, and ZIP code) 501 Pulliam Street, Suite 406, Atlanta, GA 30312 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 13c. Tel No. 678-612-8011 bdunams@atu732.org 404-223-5122 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Britt Dunamb Name (Print) Vice President **Britt Dunams**

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, PRIVACY ACT STATEMENT

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UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE				
Case No. Date Filed				
10-RC-231478	11/21/2018			

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2530 Business Dr GA Cumming 30028-4393 Republic Services 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 2530 Business Dr GA Cumming 30028-4393 Bobby Lynch 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address BLYNCH@REPUBLICSERVICES.COM (470) 302-0510 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Waste Management Services Waste Hauling Cumming, GA 5b. Description of Unit Involved 6a. No. of Employees in Unit: 37 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. F-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to Mail Mixed Manual/Mail 11a. Election Type:

Manual any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 12/21/18 Employee break room 12am, 2am, 6am 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Ben R Speight Teamsters Local 728 2540 Lakewood Ave SW 12c. Full name of national or international labor organization of which Petitioner is an affiliate or consituent (if none, so state) INTERNATIONAL BROTHERHOOD OF TEAMSTERS 12g. E-Mail Address bensp8@gmail.com 12d Tel No 12e. Cell No. 12f. Fax No. (404) 627-2045 (404) 604-6762 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) 13c Tel No. 13d Cell No. 13e Fax No. 13f F-Mail Address I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date Organizing Director Ben Speight Ben R Speight 11/20/2018 19:22:20

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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Attachment Case

DO NOT WRITE IN THIS SPACE					
Case	Date Filed				
10-RC-231478	11/21/2018				

Employees Included

All full-time and regular part time drivers and helpers who report to the Cumming, GA facility

Employees Excluded

All other employees, dispatchers, guards, and supervisors as defined in the Act.

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No	1.5	Date Filed			
10-RC	7-232612	12	/12/18		

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of; (1) the petition: (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party, 1. PURPOSE OF THIS PETITIONRC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) **AECOM** 49 GABRESKI DR., SHAW AFB, SOUTH CAROLINA 29152 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 11832 ROCK LANDING DRIVE, NEWPORT NEWS, VA 23606 WILLIAM SCOTT - SITE LEAD 3d. Cell No. 3e. Fax No 3d. E-Mail Address WILLIAM.SCOTT.51.CTR@US.AF,MIL 803-406-4577 4a. Type of Establishment (Factory, mine, wholesaler. etc.) 4b. Principal product or service 5a. City and State where unit is located; **GOVERNMENT SERVICES** SHAW AFB - SOUTH CAROLINA SERVICE CONTRACT 5b. Description of Unit Involved 6a, No. of Employees in Unit: ncluded: ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE: TECHNICIANS I, II, AND III. 6 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes 🗸 No 🗔 OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT. Check One. 🗖 7a. Request for recognítion as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or (date) (if no reply received, so state) 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state) NONE N/A 8c. Tel. No. 8d. Cell No. 8e, Fax No 8f. E-Mail Address N/A N/A N/A 8g Affiliation if any 8h. Date of Recognition or Certification 81. Expiration Date of Current or Most Recent Contract, if any (Month, Day. Year) N/A N/A N/A 9. Is there now a strike or picketing at the Employers establishment(s) involved? N/A If so, approximately how many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10a. Name 10b. Address 10c. Tel. No 10d Cell No. N/A 10f. E-Mail Address N/A N/A 10e, Fax No. N/A N/A 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to Election Type: any such election. ✓ Manual Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s) BREAK ROOM - 49 GABRESKI DRIVE, SHAW AFB, **JANUARY 4, 2019** 11:00 AM - 12:00 PM & 6:00 PM - 7:00 PM SOUTH CAROLINA 12 a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) IAMAW, AFL-CIO 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO 12e Cell No. 12g. E-Mail Address 12f. Fax No 817-505-0100 817-459-0107 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a, Name and Title 13b. Address (street and number, city, state, and ZIP code) JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE 690 E, LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011 13d. Cell No. 13d, E-Mail Address 13e. Fax No. 817-505-0100 682-401-7835 817-459-0107 JLITTLE@IAMAW.ORG I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief, Name (Print) Signature DATE GRAND LODGE REPRESENTATIVE 12/12/2018 JAMES R. LITTLE

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT
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